Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF ARIZONA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1: Identify Yourself			
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
Your full name			
Write the name that is on your government-issued	CHRISTOPHER First name		LISETTE First name
example, your driver's license or passport).	Middle name		Middle name
Bring your picture identification to your	QUEZADA Last name and Suffix (Sr., Jr., II, III)		QUEZADA Last name and Suffix (Sr., Jr., II, III)
meeting with the trustee.			
All other names you havused in the last 8 years	ve		
Include your married or maiden names.			
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9249		xxx-xx-0052
	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. CHRISTOPHER First name Middle name QUEZADA Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	About Debtor 1: Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. GUEZADA Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case): I have not used any business name or EINs. Business name(s) EINs		
		I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	20971 E VIA DE RANCHO	If Debtor 2 lives at a different address:		
		Queen Creek, AZ 85142 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Maricopa County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

	otor 1 otor 2	CHRISTOPHER QUEZAD					Case number (if known)	
_								
Par	rt 2:	Tell the Court About	Your Bank	ruptcy Ca	ase			
7.	Bank	hapter of the ruptcy Code you are			brief description of each, see \hbar , go to the top of page 1 and ch		by 11 U.S.C. § 342(b) for Individuals Filing for Baniriate box.	kruptcy
	cnoo	choosing to file under		er 7				
			☐ Chapt	er 11				
			☐ Chapt	er 12				
			☐ Chapt	er 13				
8.	How	you will pay the fee	abo ord a p	out how your er. If your re-printed	ou may pay. Typically, if you ar attorney is submitting your pa address.	e paying the fee yment on your be	heck with the clerk's office in your local court for more yourself, you may pay with cash, cashier's check, behalf, your attorney may pay with a credit card or coption, sign and attach the Application for Individual	or money check with
					ee in Installments (Official Forn		ption, sign and attach the Application for individual	3 10 1 ay
			but app	is not req lies to yo	uired to, waive your fee, and nur family size and you are una	nay do so only if ble to pay the fee	otion only if you are filing for Chapter 7. By law, a ju f your income is less than 150% of the official pove the in installments). If you choose this option, you mu Difficial Form 103B) and file it with your petition.	rty line that
9.		you filed for	■ No.					
		ruptcy within the spears?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		ny bankruptcy s pending or being	■ No					
	filed inot fi	by a spouse who is ling this case with or by a business er, or by an	☐ Yes.					
				Debtor			Relationship to you	
				District		_ When	Case number, if known	
				Debtor			Relationship to you	
				District		_ When	Case number, if known	
11.	•	ou rent your ence?	■ No.	Go to	line 12.			
	. 55.4		☐ Yes.	Has yo	our landlord obtained an eviction	on judgment agai	ainst you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial Statement</i>	About an Evictic	on Judgment Against You (Form 101A) and file it as	s part of

	otor 2 LISETTE QUEZAD			Case number (if known)	
Par	Report About Any Bu	sinesses	You Own as a Sole Proprie	etor	
12. Are you a sole proprietor of any full- or part-time business? ■ No. Go to Part 4.					
	business:	☐ Yes.	Name and location of bu	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ite & ZIP Code	
	it to this petition.			ox to describe your business:	
			☐ Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Rea	I Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as o	defined in 11 U.S.C. § 101(53A))	
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
			☐ None of the abov	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	e deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheele and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow			
	For a definition of <i>small</i>	■ No.	I am not filing under Cha	pter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	Hazardous Property or Ar	ny Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?		
	identifiable hazard to public health or safety?	hazard to			
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number Ctreet City Ctate 9 7in Code	
		Number, Street, City, State & Zip Code			

Debtor 1 CHRISTOPHER QUEZADA
Debtor 2 LISETTE QUEZADA

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

|--|

	LIOUTTE GOLLAD	·/·			(
Par	6: Answer These Questi	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	6a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe the	hat are not consumer deb	ts or business de	bts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availab			is excluded and administrative expenses		
	administrative expenses		■ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	□ 1-49		□ 1,000-5,000		2 5,001-50,000		
	you estimate that you owe?	50-99)	☐ 5001-10,000		<u></u> 50,001-100,000		
		☐ 100-1 ☐ 200-9		☐ 10,001-25,000		☐ More than100,000		
19.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001 - \$10 m	illion	□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	\$50,0	01 - \$100,000	□ \$10,000,001 - \$50		□ \$1,000,000,001 - \$10 billion		
	De Worth.	□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 - \$100 □ \$100,000,001 - \$50		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001 - \$10 m		□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50		\$1,000,000,001 - \$10 billion		
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 - \$100 □ \$100,000,001 - \$50		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
Part	7: Sign Below							
For	you	I have ex	kamined this petition, and I declare	under penalty of perjury t	hat the informatio	n provided is true and correct.		
			chosen to file under Chapter 7, I ar tates Code. I understand the relief			er Chapter 7, 11,12, or 13 of title 11, eto proceed under Chapter 7.		
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request	relief in accordance with the chapt	ter of title 11, United State	es Code, specified	I in this petition.		
		I underst bankrupt and 357	cy case can result in fines up to \$2	cealing property, or obtain 250,000, or imprisonment	ning money or pro for up to 20 years	perty by fraud in connection with a , or both. 18 U.S.C. §§ 152, 1341, 1519,		
		/s/ CHR	RISTOPHER QUEZADA		SETTE QUEZA			
			FOPHER QUEZADA e of Debtor 1		TTE QUEZADA ture of Debtor 2			
		OFFICE	E@AZLAWYER.NET	OFFI	CE@AZLAWYE	ER.NET		
			ddress of Debtor 1		Address of Debto			

Executed on March 27, 2019

Executed on March 27, 2019

Debtor 1	CHRISTOPHER QUEZADA
Debtor 2	LISETTE QUEZADA

Case number	(if known)	
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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ JAMES J. GENTILE	Date	March 27, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
JAMES J. GENTILE #9983		
Printed name		
JAMES G. GENTILE, PC		
Firm name		
4035 W CHANDLER BLVD		
SUITE #4		
Chandler, AZ 85226		
Number, Street, City, State & ZIP Code		
Contact phone (480)961-1906	Email address	JJG@AZLAWYER.NET
#9983 AZ		
Bar number & State		

Certificate Number: 01401-AZ-CC-032504443



CERTIFICATE OF COUNSELING

I CERTIFY that on March 26, 2019, at 3:05 o'clock PM EDT, Chris Quezada received from GreenPath, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the District of Arizona, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 26, 2019 By: /s/Jeremy Lark for Sarah Teets

Name: Sarah Teets

Title: Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 01401-AZ-CC-032504445



CERTIFICATE OF COUNSELING

I CERTIFY that on March 26, 2019, at 3:05 o'clock PM EDT, Lisette G Quezada received from GreenPath, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the District of Arizona, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 26, 2019 By: /s/Jeremy Lark for Sarah Teets

Name: Sarah Teets

Title: Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill	in this inforn	nation to identify your case:		
	btor 1	CHRISTOPHER QUEZADA		
		First Name Middle Name Last Name		
	btor 2	LISETTE QUEZADA		
(Spc	ouse if, filing)	First Name Middle Name Last Name		
Uni	ted States Bar	nkruptcy Court for the: DISTRICT OF ARIZONA		
Cas	se number			
	nown)		□ C	heck if this is an
			ar	mended filing
Su Be a	mmary o	rm 106Sum f Your Assets and Liabilities and Certain Statistical Information and accurate as possible. If two married people are filing together, both are equally responsible for all of your schedules first; then complete the information on this form. If you are filing amend ans, you must fill out a new Summary and check the box at the top of this page.		
Par	rt 1: Summa	arize Your Assets		
			Yo	ur assets
				lue of what you own
1.	Schedule A	/B: Property (Official Form 106A/B)		0.00
	1a. Copy line	e 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line	e 62, Total personal property, from Schedule A/B	\$	53,550.00
	1c. Copy line	e 63, Total of all property on Schedule A/B	\$	53,550.00
Par	rt 2: Summa	arize Your Liabilities		
				ur liabilities nount you owe
2.		Creditors Who Have Claims Secured by Property (Official Form 106D) a total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	38,709.00
3.	Schedule E/ 3a. Copy th	F: Creditors Who Have Unsecured Claims (Official Form 106E/F) e total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	63,645.00
	3b. Copy th	e total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	141,932.00
		Your total liabilities	\$	244,286.00
Par	rt 3: Summa	arize Your Income and Expenses		
4.		Your Income (Official Form 106I) ombined monthly income from line 12 of Schedule I	\$	8,350.00
5.		Your Expenses (Official Form 106J) nonthly expenses from line 22c of Schedule J	\$	8,350.00
Par	rt 4: Answe	r These Questions for Administrative and Statistical Records		
	-			
6.	-	ng for bankruptcy under Chapters 7, 11, or 13? u have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur othe	er schedules.
7.	YesWhat kind of	of debt do you have?		
		ebts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for old purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a perso	onal, family, or
		ebts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	s hox a	nd submit this form to
		obto allo not primarily consumer acoto. Tou have nothing to report on this part of the form. Check this	, wox a	na sabinii iilis lullii lu

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Official Form 106Sum

the court with your other schedules.

Best Case Bankruptcy

page 1 of 2

Summary of Your Assets and Liabilities and Certain Statistical Information

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

11,134.04

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	63,645.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	56,248.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	119,893.00

3.1	Model: S Year: 2 Approximate Other inform Make: E Model: J	OODGE OURNEY 018 e mileage:	Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Current value of the entire property? \$12,000.00 Do not deduct secured of the amount of any secure	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$12,000.00
3.1	Model: S Year: 2 Approximate Other inform Make: E Model: J Year: 2 Approximate	DODGE OURNEY O18 emileage:	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$12,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the	current value of the portion you own? \$12,000.00 claims or exemptions. Put ed claims on Schedule Drims Secured by Property. Current value of the portion you own?
3.1	Model: S Year: 2 Approximate Other inform Make: E Model: J Year: 2	DODGE OURNEY	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$12,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the	current value of the portion you own? \$12,000.00 claims or exemptions. Put ed claims on Schedule Drims Secured by Property. Current value of the portion you own?
3.1	Model: S Year: 2 Approximate Other inform Make: E Model: J	DODGE OURNEY	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$12,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$12,000.00 Itaims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
3.1	Model: S Year: 2 Approximate Other inform Make:	DODGE	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$12,000.00 Do not deduct secured of the amount of any secure	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$12,000.00 laims or exemptions. Put ed claims on Schedule D:
	Model: S Year: 2 Approximate	SILVERADO 2004 • mileage:	□ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another ■ Check if this is community property	the amount of any secure Creditors Who Have Clair Current value of the entire property?	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
	Model: S Year: 2 Approximate	SILVERADO 2004 • mileage:	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clai Current value of the	ed claims on Schedule D: ims Secured by Property. Current value of the
	Model: S	SILVERADO 2004	Debtor 1 only	the amount of any secure Creditors Who Have Clai Current value of the	ed claims on Schedule D: ims Secured by Property. Current value of the
	Model: S	SILVERADO	Debtor 1 only	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ims Secured by Property.
	-		· · · · ·	the amount of any secure	ed claims on Schedule D:
	Yes				
3. Ca	, ,	cks, tractors, sport ut	ility vehicles, motorcycles		
			itable interest in any vehicles, whether they are registree, also report it on Schedule G: Executory Contracts and U		ehicles you own that
Part 2	Describe \	our Vehicles			
	Yes. Where is	the property?			
_	you own or ha	, , ,	e interest in any residence, building, land, or similar property?		
		<u>-</u>	, Land, or Other Real Estate You Own or Have an Interest In		
	ation. If more r every quest		a separate sheet to this form. On the top of any additional pag	ges, write your name and cas	e number (if known).
In eacl	n category, se t fits best. Be	eparately list and describe as complete and accura	e items. List an asset only once. If an asset fits in more than of te as possible. If two married people are filing together, both a	are equally responsible for su	upplying correct
_		<u>rm 106A/B</u> e A/B: Prop	ertv		12/15
O.(–	4004/5			Ū
Case	number				☐ Check if this is an amended filing
Unite	d States Bar	nkruptcy Court for the:	DISTRICT OF ARIZONA		
	or 2 e, if filing)	LISETTE QUEZAI First Name	Middle Name Last Name		
Debte (Spous		First Name	Middle Name Last Name		
	or 1	CHRISTOPHER Q			

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1 Debtor 2	CHRISTOPHER QUEZADA LISETTE QUEZADA Case numbe	r (if known)
	e dollar value of the portion you own for all of your entries from Part 2, including any entries you have attached for Part 2. Write that number here	
Part 3: D	escribe Your Personal and Household Items	
Do you o	wn or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	nold goods and furnishings les: Major appliances, furniture, linens, china, kitchenware	
Yes	Describe	
	HOUSEHOLD INVENTORY-BEDS, CHAIRS, SOFAS, TABLES, LAMPS, KITCHEN GOODS, LINENS, RUGS, SHELVES, DRESSERS AND "KNICK KNACKS"	\$2,650.00
□ No	nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanne including cell phones, cameras, media players, games Describe	rs; music collections; electronic devices
	TV(S), RADIO, CELL PHONE(S) AND COMPUTER(S)	\$450.00
<i>Exam</i> ı □ No	ibles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; s other collections, memorabilia, collectibles Describe	tamp, coin, or baseball card collections;
	MISCELLANEOUS BOOKS, PICTURES, ETC.	\$500.00
Examp	nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, ski musical instruments Describe	s; canoes and kayaks; carpentry tools;
□ No	ms ples: Pistols, rifles, shotguns, ammunition, and related equipment Describe	
— 163		
	9MM PISTOL	\$800.00
□ No	ples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe	
	CLOTHING & ACCESSORIES & MISC COSTUME JEWELRY	\$1,000.00
□ No	ry ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watcho Describe	es, gems, gold, silver

Official Form 106A/B Schedule A/B: Property page 2

Debtor 2	LISETTE QU	IEZADA IEZADA		Case number (if known)	
		WEDDING/ENGAGEME	ENT RING		\$500.00
Exam	arm animals nples: Dogs, cats,	birds, horses			
		1 DOG			\$50.00
■ No	other personal an		not already list, including any	health aids you did not list	
		-	art 3, including any entries fo		\$5,950.00
	escribe Your Finan wn or have any I	cial Assets egal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No □ Yes. 17. Depos	sits of money	avings, or other financial acco	ounts; certificates of deposit; sha	on hand when you file your petition ares in credit unions, brokerage ho	
□ No		If you have multiple accounts	s with the same institution, list ea	ach.	
■ Yes	······································	CHECKING AN 17.1. SAVINGS			\$600.00
Exam ■ No	nples: Bond funds,	or publicly traded stocks investment accounts with bro	okerage firms, money market ac	counts	
19. Non-p	oublicly traded st venture			usinesses, including an interest	in an LLC, partnership, and
	. Give specific inf	ormation about them Name of entity:		% of ownership:	
Nego Non-r ■ No	otiable instruments negotiable instrum	include personal checks, cas	otiable and non-negotiable ins shiers' checks, promissory notes ansfer to someone by signing or	s, and money orders.	
	ement or pension apples: Interests in		403(b), thrift savings accounts, c	or other pension or profit-sharing p	lans
	List each accour	nt separately. Type of account:	Institution name:		_
Official For	rm 106A/B		Schedule A/B: Property		page 3

Best Case Bankruptcy

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

■ No

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund

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Best Case Bankruptcy

page 4

Schedule A/B: Property

Debtor 1 Debtor 2	CHRISTOPHER QUEZADA	Case number (if known)	
Debioi 2	LISETTE QUEZADA	Case number (# known)	
If you a someon	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurar ne has died. Give specific information	nce policy, or are currently entitled to rec	eive property because
Examp ■ No	against third parties, whether or not you have filed a lawsuit or ples: Accidents, employment disputes, insurance claims, or rights to suppose the property of		
■ No	contingent and unliquidated claims of every nature, including contingent and unliquidated claims of every nature, including continues of every nature of ev	unterclaims of the debtor and rights t	o set off claims
■ No	ancial assets you did not already list Give specific information		
	he dollar value of all of your entries from Part 4, including any er rt 4. Write that number here		\$10,600.00
Part 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. Lis	st any real estate in Part 1.	
37. Do you o	own or have any legal or equitable interest in any business-related proper	ty?	
■ No. Go	to Part 6.		
☐ Yes. G	to to line 38.		
	scribe Any Farm- and Commercial Fishing-Related Property You Own or F ou own or have an interest in farmland, list it in Part 1.	lave an Interest In.	
■ No. (own or have any legal or equitable interest in any farm- or comr Go to Part 7. Go to line 47.	nercial fishing-related property?	
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not	List Above	
Examp ■ No	have other property of any kind you did not already list? bles: Season tickets, country club membership Give specific information		
54. Add tl	he dollar value of all of your entries from Part 7. Write that numb	er here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

CHRISTOPHER QUEZADA Debtor 1 Debtor 2 LISETTE QUEZADA

Case number (if known)

Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			\$0.00
56. Part 2: Total vehicles, line 5	\$37,000.00		
57. Part 3: Total personal and household items, line 15	\$5,950.00		
58. Part 4: Total financial assets, line 36	\$10,600.00		
59. Part 5: Total business-related property, line 45	\$0.00		
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7: Total other property not listed, line 54 +	\$0.00		
62. Total personal property. Add lines 56 through 61	\$53,550.00	Copy personal property total	\$53,550.00
63. Total of all property on Schedule A/B. Add line 55 + line 62			\$53,550.00

Fill in this information to identify your case:							
Debtor 1	CHRISTOPHER C	CHRISTOPHER QUEZADA					
	First Name	Middle Name	Last Name				
Debtor 2	LISETTE QUEZAI	DA					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	inkruptcy Court for the:	DISTRICT OF ARIZONA					
Case number (if known)					☐ Check if this is an amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt
1. Whic	h set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

		•	•	, ,				
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)				
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	2004 CHEVY SILVERADO Line from Schedule A/B: 3.1	\$12,000.00	-	\$2,621.00	Ariz. Rev. Stat. § 33-1125(8)			
	Line IIIIII Schedule AVD. 3.1			100% of fair market value, up to any applicable statutory limit				
	HOUSEHOLD INVENTORY-BEDS, CHAIRS, SOFAS, TABLES, LAMPS,	\$2,650.00		\$2,650.00	Ariz. Rev. Stat. § 33-1123			
	KITCHEN GOODS, LINENS, RUGS, SHELVES, DRESSERS AND "KNICK KNACKS"			100% of fair market value, up to any applicable statutory limit				
	Line from Schedule A/B: 6.1							
	TV(S), RADIO, CELL PHONE(S) AND COMPUTER(S)	\$450.00		\$450.00	Ariz. Rev. Stat. § 33-1123			
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit				
	MISCELLANEOUS BOOKS, PICTURES, ETC.	\$500.00		\$500.00	Ariz. Rev. Stat. § 33-1125(5)			
	Line from Schedule A/B: 8.1			100% of fair market value, up to any applicable statutory limit				
	9MM PISTOL Line from Schedule A/B: 10.1	\$800.00		\$800.00	Ariz. Rev. Stat. § 33-1125(10)			
	LINE HOLL SCHEUUIE PAD. 10.1			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

	ebtor 1 CHRISTOPHER QUEZADA LISETTE QUEZADA			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	CLOTHING & ACCESSORIES & MISC COSTUME JEWELRY	\$1,000.00		\$1,000.00	Ariz. Rev. Stat. § 33-1125(1)
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
	WEDDING/ENGAGEMENT RING Line from Schedule A/B: 12.1	\$500.00		\$500.00	Ariz. Rev. Stat. § 33-1125(4)
	Ellic Holli Golleddie A.B. 1211			100% of fair market value, up to any applicable statutory limit	
	1 DOG Line from Schedule A/B: 13.1	\$50.00		\$50.00	Ariz. Rev. Stat. § 33-1125(11)
	Line IIom Schedule A/B. 13.1			100% of fair market value, up to any applicable statutory limit	
	CHECKING AND SAVINGS: BANK OF AMERICA	\$600.00		\$600.00	Ariz. Rev. Stat. § 33-1126(A)(8)
	NAVY FCU Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	ASRS Line from Schedule A/B: 21.1	Unknown		Unknown	Ariz. Rev. Stat. § 33-1126(B)
	Line from Genedate A.B. 2111			100% of fair market value, up to any applicable statutory limit	
	401K: PRINCIPAL Line from Schedule A/B: 21.2	\$10,000.00		\$10,000.00	Ariz. Rev. Stat. § 33-1126(B)
	Line from Schedule A.B. 2112			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 No	years after that for ca	ises fi	·	
	☐ Yes. Did you acquire the property covere☐ No	d by the exemption wi	thin 1	,215 days before you filed this case?	•

Yes

Fill in this inforn	nation to identify you	r case:				
Debtor 1	CHRISTOPHER	QUEZADA				
	First Name	Middle Name	Last Name		-	
Debtor 2	LISETTE QUEZ				-	
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	DISTRICT OF ARIZONA			-	
Case number					□ Check	if this is an
					_	led filing
000 1 1 5	4000					-
Official Form			_			
Schedule	D: Creditors	Who Have Claims	Secure	d by Propert	у	12/15
		If two married people are filing togeth out, number the entries, and attach it				
• •	have claims secured by	vour property?				
	_	nis form to the court with your other	echadulas V	ou have nothing else t	to report on this form	
_		·	scriedules. T	ou have nothing else i	to report on this form.	
	all of the information	pelow.				
Part 1: List Al	II Secured Claims			Column A	Column B	Column C
		nore than one secured claim, list the cre a particular claim, list the other creditors		Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's nam		Do not deduct the	that supports this	portion
2.1 Family Lo	an Co Inc	Describe the property that secures t	the claim:	value of collateral. \$9,379.00	claim \$12,000.00	If any \$0.00
Creditor's Name		2004 CHEVY SILVERADO		Ψο,στοισσ	Ψ12,000.00	Ψ0.00
		As of the date you file, the claim is:	Check all that			
	n Buren St	apply.	Oncok dii tilat			
Phoenix, A		☐ Contingent				
Number, Street,	, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as i	mortgage or sec	cured		
Debtor 2 only		car loan)				
■ Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
☐ At least one of the	he debtors and another	☐ Judgment lien from a lawsuit				
Check if this class community de	aim relates to a bt	Other (including a right to offset)	SECURITY	AGREEMENT		
	Opened					
	09/18 Last					

5769

Active

Date debt was incurred 11/24/18

Desc

Last 4 digits of account number

Debtor 1	CHRISTO	PHER QUEZA	DA		Case number (if known)		
	First Name	Middle N	Name Last Name	-			
Debtor 2	LISETTE (QUEZADA					
	First Name	Middle N	Name Last Name	-			
2.2 Ac	agship Cred	it	Describe the property that secures the	he claim:	\$29,330.00	\$25,000.00	\$4,330.00
Cre	ditor's Name		2018 DODGE JOURNEY				
	Box 965 nadds Ford,	PA 19317	As of the date you file, the claim is: capply. Contingent	Check all that			
Nur	mber, Street, City, S	State & Zip Code	☐ Unliquidated				
Who ow	Who owes the debt? Check one.		☐ Disputed Nature of lien. Check all that apply.				
☐ Debto	•		An agreement you made (such as mortgage or secured car loan)				
Debto	or 1 and Debtor 2	only!	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At lea	st one of the deb	otors and another	☐ Judgment lien from a lawsuit				
	k if this claim re munity debt	elates to a	Other (including a right to offset)	SECURIT	TY AGREEMENT		
Date deb	nt was incurred	Opened 07/18 Last Active 11/02/18	Last 4 digits of account numb	per <u>100</u> 1	1		
Add th	o dollar value o	f vour ontrino in f	Column A on this mage. Write that numb	or boro	\$38,709.	00	
		•	Column A on this page. Write that numb I the dollar value totals from all pages.	er nere:	·		
	hat number her		and the purpose		\$38,709.	UU	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

	nation to identify your c	ase:				
Debtor 1	CHRISTOPHER QU	JEZADA				
	First Name	Middle Name	Last Name			
Debtor 2	LISETTE QUEZAD	Α				
(Spouse if, filing)	First Name	Middle Name	Last Name	_		
United States Bar	nkruptcy Court for the:	DISTRICT OF ARIZON	A			
Case number(if known)					☐ Check amend	if this is an ed filing
	/F: Creditors WI					12/15
any executory contr Schedule G: Execut Schedule D: Credito	racts or unexpired leases to cory Contracts and Unexpirors Who Have Claims Secutinuation Page to this page	hat could result in a claim red Leases (Official Form 1 ired by Property. If more sp	PRIORITY claims and Part 2 for . Also list executory contract 106G). Do not include any crepace is needed, copy the Paron to report in a Part, do not the contract of the part of the part is a part of the part o	ts on Schedule A/B: Feditors with partially s t you need, fill it out, i	Property (Official For secured claims that a number the entries in	m 106A/B) and on tre listed in In the boxes on the
Part 1: List All	of Your PRIORITY Uns	secured Claims				
1. Do any credito	rs have priority unsecured	claims against you?				
☐ No. Go to Pa	art 2.					
Yes.						
List all of your identify what typ possible, list the	e of claim it is. If a claim has	s both priority and nonpriority r according to the creditor's r	one priority unsecured claim, li y amounts, list that claim here a name. If you have more than tw reditors in Part 3.	and show both priority a	ind nonpriority amount	ts. As much as
List all of your identify what typ possible, list the Part 1. If more the	be of claim it is. If a claim has e claims in alphabetical order han one creditor holds a par	s both priority and nonpriority r according to the creditor's r ticular claim, list the other cr	y amounts, list that claim here a name. If you have more than tw	and show both priority a	ind nonpriority amount	s. As much as nuation Page of Nonpriority
2. List all of your identify what typ possible, list the Part 1. If more the (For an explana)	be of claim it is. If a claim has e claims in alphabetical order han one creditor holds a par	s both priority and nonpriority r according to the creditor's r ticular claim, list the other cr ee the instructions for this for	y amounts, list that claim here a name. If you have more than tw editors in Part 3.	and show both priority a so priority unsecured cla	nd nonpriority amount aims, fill out the Contir	Nonpriority amount
2. List all of your identify what typ possible, list the Part 1. If more the (For an explana) 2.1 AZ DEP Priority Cre	e of claim it is. If a claim has e claims in alphabetical order han one creditor holds a par tion of each type of claim, se	s both priority and nonpriority r according to the creditor's r ticular claim, list the other cr ee the instructions for this for Last 4 digits o	y amounts, list that claim here a name. If you have more than tw editors in Part 3. rm in the instruction booklet.)	and show both priority a no priority unsecured cla Total claim	nd nonpriority amount aims, fill out the Contin Priority amount	Nonpriority amount
2. List all of your identify what typ possible, list the Part 1. If more ti (For an explana 2.1 AZ DEP Priority Cre 1600 W Phoenix	TOF REVENUE Boditor's Name MONROE 4, AZ 85007-2650	s both priority and nonpriority r according to the creditor's r ticular claim, list the other cr ee the instructions for this for Last 4 digits o When was the	y amounts, list that claim here a name. If you have more than tw editors in Part 3. rm in the instruction booklet.) of account number debt incurred?	nd show both priority a ro priority unsecured class Total claim \$13,538.00	nd nonpriority amount aims, fill out the Contin Priority amount	s. As much as nuation Page of Nonpriority
2. List all of your identify what typ possible, list the Part 1. If more ti (For an explana 2.1 AZ DEP Priority Cre 1600 W Phoenix Number St	e of claim it is. If a claim has e claims in alphabetical order han one creditor holds a partion of each type of claim, set T OF REVENUE editor's Name MONROE 1, AZ 85007-2650 reet City State Zip Code	s both priority and nonpriority r according to the creditor's r ticular claim, list the other cr ee the instructions for this for Last 4 digits o When was the As of the date	y amounts, list that claim here a name. If you have more than tw editors in Part 3. rm in the instruction booklet.) of account number	nd show both priority a ro priority unsecured class Total claim \$13,538.00	nd nonpriority amount aims, fill out the Contin Priority amount	Nonpriority amount
2. List all of your identify what typ possible, list the Part 1. If more ti (For an explana 2.1 AZ DEP Priority Cre 1600 W Phoenix Number St Who incurred	TOF REVENUE editor's Name MORROE s, AZ 85007-2650 reet City State Zip Code I the debt? Check one.	s both priority and nonpriority r according to the creditor's r ticular claim, list the other cr ee the instructions for this for Last 4 digits o When was the As of the date Contingent	y amounts, list that claim here a name. If you have more than tweditors in Part 3. rm in the instruction booklet.) of account number debt incurred? you file, the claim is: Check a	nd show both priority a ro priority unsecured class Total claim \$13,538.00	nd nonpriority amount aims, fill out the Contin Priority amount	Nonpriority amount
2. List all of your identify what typ possible, list the Part 1. If more ti (For an explana 2.1 AZ DEP Priority Cre 1600 W Phoenix Number St Who incurred Debtor 1 or	T OF REVENUE editor's Name MONROE A 285007-2650 reet City State Zip Code the debt? Check one.	both priority and nonpriority r according to the creditor's r ticular claim, list the other cr ee the instructions for this for Last 4 digits o When was the As of the date Contingent Unliquidated	y amounts, list that claim here a name. If you have more than tweditors in Part 3. rm in the instruction booklet.) of account number debt incurred? you file, the claim is: Check a	nd show both priority a ro priority unsecured class Total claim \$13,538.00	nd nonpriority amount aims, fill out the Contin Priority amount	Nonpriority amount
2. List all of your identify what typ possible, list the Part 1. If more ti (For an explana 2.1 AZ DEP Priority Cre 1600 W Phoenix Number St Who incurred Debtor 1 or Debtor 2 or Debtor	TOF REVENUE editor's Name MORROE s, AZ 85007-2650 reet City State Zip Code Ithe debt? Check one.	both priority and nonpriority according to the creditor's r ticular claim, list the other cr ticular claim, list the other cr the instructions for this for Last 4 digits o When was the As of the date Contingent Unliquidated Disputed	y amounts, list that claim here a name. If you have more than tweditors in Part 3. rm in the instruction booklet.) of account number debt incurred? you file, the claim is: Check and	nd show both priority a ro priority unsecured class Total claim \$13,538.00	nd nonpriority amount aims, fill out the Contin Priority amount	Nonpriority amount
2. List all of your identify what typ possible, list the Part 1. If more ti (For an explana 2.1 AZ DEP Priority Cre 1600 W Phoenix Number St Who incurred Debtor 1 or Debtor 2 or Debtor	T OF REVENUE editor's Name MONROE A 285007-2650 reet City State Zip Code the debt? Check one.	both priority and nonpriority according to the creditor's r ticular claim, list the other cr ticular claim, list the other cr the the instructions for this for Last 4 digits o When was the As of the date Contingent Unliquidated Disputed Type of PRIOR	y amounts, list that claim here a name. If you have more than tweditors in Part 3. rm in the instruction booklet.) of account number debt incurred? you file, the claim is: Check and the claim is	nd show both priority a ro priority unsecured class Total claim \$13,538.00	nd nonpriority amount aims, fill out the Contin Priority amount	Nonpriority amount
2. List all of your identify what typ possible, list the Part 1. If more the Forman explana 2.1 AZ DEP* Priority Cree 1600 W Phoenix Number St: Who incurred Debtor 1 or Debtor 2 or Debtor 1 ar	TOF REVENUE editor's Name MORROE s, AZ 85007-2650 reet City State Zip Code Ithe debt? Check one.	be both priority and nonpriority according to the creditor's r ticular claim, list the other cr be the instructions for this for Last 4 digits o When was the As of the date Contingent Unliquidated Type of PRIOR	y amounts, list that claim here a name. If you have more than tweditors in Part 3. rm in the instruction booklet.) of account number debt incurred? you file, the claim is: Check and	nd show both priority a ro priority unsecured class Total claim \$13,538.00	nd nonpriority amount aims, fill out the Contin Priority amount	s. As much as nuation Page of Nonpriority amount
2. List all of your identify what typ possible, list the Part 1. If more ti (For an explana) 2.1 AZ DEP Priority Cre 1600 W Phoenix Number St Who incurred Debtor 1 or Debtor 2 or At least one	TOF REVENUE additor's Name MONROE A 285007-2650 reet City State Zip Code I the debt? Check one. Inly and Debtor 2 only	both priority and nonpriority according to the creditor's r ticular claim, list the other cr ticular claim, list the other cr the the instructions for this for Last 4 digits o When was the As of the date Contingent Unliquidated Type of PRIOR Domestic su	y amounts, list that claim here a name. If you have more than tweditors in Part 3. rm in the instruction booklet.) of account number debt incurred? you file, the claim is: Check and the claim is	Ind show both priority a priority and priority unsecured class and claim \$13,538.00 all that apply	nd nonpriority amount aims, fill out the Contin Priority amount	Nonpriority
2. List all of your identify what typ possible, list the Part 1. If more ti (For an explana) 2.1 AZ DEP Priority Cre 1600 W Phoenix Number Sti Who incurred Debtor 1 or Debtor 2 or At least one Check if the	TOF REVENUE TOF REVENUE Editor's Name MONROE S, AZ 85007-2650 Teet City State Zip Code Ithe debt? Check one. Inly Ind Debtor 2 only The claim it is. If a claim has a claims in alphabetical order has a claim in a claim. TOF REVENUE TOF REVENU	both priority and nonpriority according to the creditor's r ticular claim, list the other cr ticular claim, list the other cr the the instructions for this for Last 4 digits o When was the As of the date Contingent Unliquidated Type of PRIOR Domestic su Ity debt Taxes and of	y amounts, list that claim here a name. If you have more than tweeditors in Part 3. rm in the instruction booklet.) of account number debt incurred? you file, the claim is: Check and the claim i	Ind show both priority a priority and priority unsecured class and priorit	nd nonpriority amount aims, fill out the Contin Priority amount	Nonpriority
2. List all of your identify what typ possible, list the Part 1. If more ti (For an explana) 2.1 AZ DEP Priority Cre 1600 W Phoenix Number Sti Who incurred Debtor 1 or Debtor 2 or At least one Check if the	TOF REVENUE editor's Name MONROE s, AZ 85007-2650 reet City State Zip Code I the debt? Check one. Inly Ind Debtor 2 only e of the debtors and another Inis claim is for a communications in alphabetical order.	both priority and nonpriority according to the creditor's r ticular claim, list the other cr ticular claim, list the other cr the the instructions for this for Last 4 digits o When was the As of the date Contingent Unliquidated Type of PRIOR Domestic su Ity debt Taxes and of	y amounts, list that claim here a name. If you have more than twe ditors in Part 3. If my in the instruction booklet.) If account number I debt incurred? You file, the claim is: Check and the cl	Total claim \$13,538.00 all that apply government bu were intoxicated	nd nonpriority amount aims, fill out the Continues, fi	Nonpriority

2016, 2017 AND 2018

Debto	or 1 CHRISTOPHER QUEZADA or 2 LISETTE QUEZADA		Case number (if kn	own)		
2.2	IRS	Last 4 digits of account number	\$50,	107.00	\$37,514.00	\$12,593.00
	Priority Creditor's Name CENTRALIZED INSOLVENCY OPERATIONS PO BOX 7346	When was the debt incurred?			· · ·	
	Philadelphia, PA 19101-7346					
	Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply			
_	Who incurred the debt? Check one.	☐ Contingent				
_	Debtor 1 only	☐ Unliquidated				
L	Debtor 2 only	☐ Disputed				
ı	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:				
	\square At least one of the debtors and another	☐ Domestic support obligations				
Г	Check if this claim is for a community debt	Taxes and certain other debts you	owe the government			
l:	s the claim subject to offset?	☐ Claims for death or personal injury	while you were intoxi	cated		
ı	No	Other. Specify				
	□Yes	2015, 2016, 2	017 AND 2018 I	NCOME TAX	KES	
un: tha	st all of your nonpriority unsecured claims in the isecured claim, list the creditor separately for each can one creditor holds a particular claim, list the other art 2.	laim. For each claim listed, identify what t	ype of claim it is. Do	not list claims al	ready included in	Part 1. If more tition Page of
4.1	Asima Cradit Eka Simpl	Last 4 digits of account number	8705		101411	
4.1	Acima Credit Fka Simpl Nonpriority Creditor's Name 9815 Monroe Street	Last 4 digits of account number	Opened 05/17	' Last Δctiv		
	4th Floor Sandy, UT 84070 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim in	10/06/17		e 	\$935.00
	4th Floor Sandy, UT 84070 Number Street City State Zip Code	_	10/06/17		e 	<u>\$935.00</u>
	4th Floor Sandy, UT 84070 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only	As of the date you file, the claim	10/06/17		e 	<u>\$935.00</u>
	4th Floor Sandy, UT 84070 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	10/06/17		e 	\$935.00
	4th Floor Sandy, UT 84070 Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only	As of the date you file, the claim i	10/06/17 s: Check all that app		e 	\$935.00
	4th Floor Sandy, UT 84070 Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	As of the date you file, the claim in Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa	10/06/17 s: Check all that app	ly		\$935.00
	4th Floor Sandy, UT 84070 Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	As of the date you file, the claim in Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans	10/06/17 s: Check all that app d claim: ration agreement or	ly divorce that you		\$935.00

Debto	or 2 LISETTE QUEZADA		Case number (if known)	
4.2	Ad Astra Recovery	Last 4 digits of account number	3671	\$1,538.00
	Nonpriority Creditor's Name 7330 West 33rd Street North Suite 118 Wichita, KS 67205	When was the debt incurred?	Opened 09/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Speedy Cash 47	
4.3	Arizona Federal	Last 4 digits of account number	0080	\$0.00
	Nonpriority Creditor's Name Attn: Risk Management Po Box 60070 Phoenix, AZ 85082	When was the debt incurred?	Opened 2/13/15 Last Active 9/15/15	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Secured Ci	redit Card	
4.4	Auto Now Financial Ser	Last 4 digits of account number	1611	\$6,505.00
	Nonpriority Creditor's Name	_		
	Attn: Bankruptcy Po Box 816	When was the debt incurred?	Opened 06/16 Last Active 9/27/16	
	Glendale, AZ 85311	when was the dept incurred?	9/21/10	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debters and another	Type of NONPRIORITY unsecure	d claim:	

debt

■ No

☐ Yes

■ Other. Specify Automobile

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

 \square Check if this claim is for a community

Is the claim subject to offset?

	or 1 CHRISTOPHER QUEZADA or 2 LISETTE QUEZADA		Case number (if known)	
4.5	Caine & Weiner	Last 4 digits of account number	2109	\$286.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5010	When was the debt incurred?	Opened 04/16	• • • • • • • • • • • • • • • • • • • •
	Woodland Hills, CA 91365 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Progressive Insurance	
4.6	Camelback Finance Inc/Cactua Jacks	Last 4 digits of account number	4150	\$6,081.00
	Nonpriority Creditor's Name Attn: Bankruptcy		Opened 10/16 Last Active	
	2440 W Camelback Rd Phoenix, AZ 85015	When was the debt incurred?	10/18/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Automobile	•	
4.7	Camelback Finance Inc/Cactua Jacks	Last 4 digits of account number	G443	\$5,281.00
	Nonpriority Creditor's Name			
	Attn: Bankruptcy 2440 W Camelback Rd Phoenix, AZ 85015	When was the debt incurred?	Opened 08/16 Last Active 10/18/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	_		
	Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	1 claim:	
	<u>_</u>	Student loans	a viuiiil.	
	Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Automobile	•	

Schedule E/F: Creditors Who Have Unsecured Claims

	r1 CHRISTOPHER QUEZADA r2 <u>LISETTE QUEZADA</u>		Case number (if known)			
4.8	CHEX SYSTEMS	Last 4 digits of account number		\$0.00		
	Nonpriority Creditor's Name ATTN: CUSTOMER RELATIONS 7805 HUDSON RD #100 Saint Paul, MN 55125	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	•				
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	■ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	_	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify NOTICE ON	ILY			
4.9	Conn's HomePlus	Last 4 digits of account number	2730	\$3,130.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 2358	When was the debt incurred?	Opened 09/14 Last Active 7/31/17			
	Beaumont, TX 77704					
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated	Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims				
	■ No	Debts to pension or profit-sharing				
	Yes	☐ Yes ☐ Other. Specify Secured				
4.1	Conn's HomePlus	Last 4 digits of account number	8830	\$1,192.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 2358	When was the debt incurred?	Opened 05/15 Last Active 10/27/16			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	□ vos	■ ou ou Secured				

	or 1 CHRISTOPHER QUEZADA or 2 LISETTE QUEZADA	Case number (if known)			
4.1 1	Conn's HomePlus	Last 4 digits of account number	4930	\$1,016.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 2358	When was the debt incurred?	Opened 05/16 Last Active 10/28/16		
	Beaumont, TX 77704 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Secured	g plans, and other similar debts		
4.1 2	Convergent Outsourcing, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	9068	\$960.00	
	Attn: Bankruptcy Po Box 9004 Renton, WA 98057	When was the debt incurred?	Opened 05/17		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No □ Yes	Debts to pension or profit-sharing	g plans, and other similar debts Attorney Cox Communications		
		— Other. Specify			
4.1 3	CSC CREDIT SERVICES Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00	
	BOX 740040 Atlanta, GA 30374	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск аll that apply		
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community debt	☐ Student loans	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin			
		Other Specify NOTICE ON			

	or 1 CHRISTOPHER QUEZADA Dr 2 LISETTE QUEZADA		Case number (if known)	
4.1	Diversified Adjustment Swervices, Inc	Last 4 digits of account number	9771	\$916.00
	Nonpriority Creditor's Name Dasi-Bankrupcty Po Box 32145 Fridley MN 55422	When was the debt incurred?	Opened 10/18	
	Fridley, MN 55432 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Arizona Public Service	
4.1 5	Diversified Consultants, Inc.	Last 4 digits of account number	6378	\$1,265.00
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 05/18	
	Po Box 551268 Jacksonville, FL 32255 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Dish Network	
4.1 6	EQUIFAX INFORMATION SERIVICES, LLC	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name PO BOX 740256 Atlanta, GA 30374	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify NOTICE ONLY

ERC/Enhanced Recovery Corp	Last 4 digits of account number	3417	\$787.00
Nonpriority Creditor's Name Attn: Bankruptcy 8014 Bayberry Road	When was the debt incurred?	Opened 11/16	
Jacksonville, FL 32256 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	Contingent		
■ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Collection A	- ·	
ш тез	Other. Specify	Attorney At 1 modifity	
EXPERIAN Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
PO BOX 9701 Allen, TX 75013	When was the debt incurred?		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	- ·	
Yes	Other. Specify NOTICE ON	NLY	
Honor Finance Nonpriority Creditor's Name	Last 4 digits of account number	2201	\$4,547.00
909 Davis Street Suite 260	When was the debt incurred?	Opened 6/24/14 Last Active 4/24/18	
Evanston, IL 60201 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	uration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	Other, Specify Automobile	•	

	1 CHRISTOPHER QUEZADA 2 LISETTE QUEZADA		Case number (if knov	vn)	
4.2	INDRANIL PAL	Last 4 digits of account number			\$5,500.00
0	Nonpriority Creditor's Name 6812 W SKYLARK DR Glendale, AZ 85308	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	,	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	■ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	■ No □ Yes	☐ Debts to pension or profit-sharin	51 ,		
	□ Yes	Other. Specify			
4.2 1	Navy FCU	Last 4 digits of account number	9264		\$627.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119	When was the debt incurred?	Opened 09/18 11/29/18	Last Active	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	,	
	Who incurred the debt? Check one. ☐ Debtor 1 only	_			
	Debtor 2 only	Contingent			
	<u> </u>	Unliquidated			
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or di	vorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other sim	ilar debts	
	Yes	Other. Specify Credit Card	i		
4.2	PROGRESSIVE	Last 4 digits of account number			\$4,000.00
	Nonpriority Creditor's Name 256 W DATA DR Draper, UT 84020	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	,	
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	■ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or di	vorce that you did not	

■ No ☐ Yes

Other. Specify

 \square Debts to pension or profit-sharing plans, and other similar debts

		Case number (if known)			
Progressive Management Systems	Last 4 digits of account number	2014	\$50.00		
Nonpriority Creditor's Name Attn: Bankruptcy Department 1521 W Cameron Ave., First Floor West Covina, CA 91790	When was the debt incurred?	Opened 08/18			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
■ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	_ Collection	Attorney Phoenix Children S			
Yes	Other. Specify Medical Gr				
Progressive Management Systems	Last 4 digits of account number	0197	\$50.00		
Nonpriority Creditor's Name Attn: Bankruptcy Department 1521 W Cameron Ave., First Floor	When was the debt incurred?	Opened 10/18			
West Covina, CA 91790 Number Street City State Zip Code	As of the data you file the claim	in Charle all that apply			
Who incurred the debt? Check one.	As of the date you file, the claim	ів: Спеск ан тат арріу			
Debtor 1 only	Пол				
_	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.			
At least one of the debtors and another	Student loans	d Claim:			
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims	·			
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
□Yes	Collection Medical Gr	Attorney Phoenix Children S o			
PURCHASING POWER	Last 4 digits of account number		\$2,600.00		
Nonpriority Creditor's Name 1349 W PEACHTREE ST #1100	When was the debt incurred?				
Atlanta, GA 30309 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
☐ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
Check if this claim is for a community	☐ Student loans				
debt	_	aration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims	and the state of t			
No	Debts to pension or profit-sharing	ng plans, and other similar debts			
☐ Yes	Other. Specify				

Debtor 1 CHRISTOPHER QUEZADA Debtor 2 LISETTE QUEZADA Case number (if known)				
4.2 6	Regional Acceptance Co	Last 4 digits of account number	9701	\$16,260.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1487 Wilson, NC 27894	When was the debt incurred?	Opened 05/15 Last Active 11/18/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Automobile	3	
4.2 7	RENTER'S WAREHOUSE	Last 4 digits of account number		\$8,900.00
	Nonpriority Creditor's Name 7227 N 16TH ST SUITE 260 Phoenix, AZ 85020	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.2	ROCKY'S AUTO CREDIT Nonpriority Creditor's Name	Last 4 digits of account number		\$5,200.00
	PO BOX 6834 Mesa, AZ 85216	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other, Specify		

Schedule E/F: Creditors Who Have Unsecured Claims

Other. Specify _____

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	or 1 CHRISTOPHER QUEZADA or 2 LISETTE QUEZADA		Case number (if known)		
4.2 9	SNAP FINANCE	Last 4 digits of account number		\$2,200.00	
	Nonpriority Creditor's Name PO BOX 26561 Salt Lake City, UT 84126	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	■ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	□Yes	Other. Specify			
4.3	TRANS UNION	Last 4 digits of account number		\$0.00	
	Nonpriority Creditor's Name PO BOX 1000	When was the debt incurred?			
	Crum Lynne, PA 19022 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	■ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing			
	Yes	Other. Specify NOTICE ON	ILY		
4.3 1	U.S. Department of Education	Last 4 digits of account number	2536	\$11,302.00	
	Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Boul, MN 55416	When was the debt incurred?	Opened 12/08 Last Active 8/05/17		
	Saint Paul, MN 55116 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	-	,		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	\square Check if this claim is for a community debt	Student loansObligations arising out of a sepa	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	,		

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

☐ Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

	1 CHRISTOPHER QUEZADA 2 LISETTE QUEZADA	Case number (if known)		
4.3	U.S. Department of Education	Last 4 digits of account number	0075	\$8,192.00
	Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 08/10 Last Active 8/14/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	Other. Specify		
		Educationa	ıl	
4.3	U.S. Department of Education	Last 4 digits of account number	0080	\$6,412.00
	Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 04/11 Last Active 8/14/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharin		
	☐ Yes	Other. Specify		
		Educationa	ll	
4.3 4	U.S. Department of Education Nonpriority Creditor's Name	Last 4 digits of account number	2540	\$5,373.00
	Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 12/08 Last Active 8/05/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt	■ Student loans□ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		

Schedule E/F: Creditors Who Have Unsecured Claims

2 LISETTE QUEZADA		Case number (if known)	
U.S. Department of Education	Last 4 digits of account number	3168	\$4,719.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408	When was the debt incurred?	Opened 04/11 Last Active 8/14/18	
Saint Paul, MN 55116 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	l .	
U.S. Department of Education	Last 4 digits of account number	3172	\$3,670.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408	When was the debt incurred?	Opened 08/10 Last Active 8/14/18	
Saint Paul, MN 55116 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	l	
U.S. Department of Education	Last 4 digits of account number	2546	\$3,361.00
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 09/09 Last Active 8/05/17	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.			
■ Debtor 1 only	Contingent		
☐ Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed	·	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured		
Check if this claim is for a community	■ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
debt Is the claim subject to offset?			
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	Other Specify		

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor Debtor	1 CHRISTOPHER QUEZADA 12 LISETTE QUEZADA		Case number (if known)	
4.3	U.S. Department of Education Nonpriority Creditor's Name	Last 4 digits of account number	0068	\$2,929.00
	Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 01/12 Last Active 8/14/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	☐ Debtor 1 only ■ Debtor 2 only	☐ Contingent☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt	Student loansObligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Euucationa		
4.3 9	U.S. Department of Education Nonpriority Creditor's Name	Last 4 digits of account number	0959	\$2,401.00
	Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 08/15 Last Active 9/03/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt	■ Student loans□ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Li res	☐ Other. Specify		
			·	
4.4 0	U.S. Department of Education Nonpriority Creditor's Name	Last 4 digits of account number	2554	\$2,183.00
	Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 09/09 Last Active 8/05/17	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt	■ Student loans□ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		
	■ NO	Other Specify		

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor :	1 CHRISTOPHER QUEZADA 2 LISETTE QUEZADA		Case number (if known)	
	U.S. Department of Education Nonpriority Creditor's Name Ecmc/Bankruptcy	Last 4 digits of account number	3186 Opened 01/12 Last Active	\$1,810.00
	Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	8/14/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	l .	
- 1	U.S. Department of Education	Last 4 digits of account number	0085	\$1,274.00
	Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 12/11 Last Active 8/14/18	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	■ Student loans □ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	agiosinon or arono maryou are not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	l .	
4.4	U.S. Department of Education	Last 4 digits of account number	3183	\$1,204.00
	Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 01/12 Last Active 8/14/18	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	1 claim	
	At least one of the debtors and another	<u> </u>	a Giaiiii.	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a place and other similar 4-5-5-	
	■ No	☐ Debts to pension or profit-sharin	y pians, and other Similal debts	

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Schedule E/F: Creditors Who Have Unsecured Claims

Educational

12 LISETTE QUEZADA		Case number (if known)	
U.S. Department of Education	Last 4 digits of account number	3190	\$987.0
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 12/11 Last Active 8/14/18	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	Educationa	al .	
U.S. Department of Education	Last 4 digits of account number	0059	\$431.0
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 01/12 Last Active 8/14/18	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
\square Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		
	Educationa	al	
US BANK	Last 4 digits of account number		\$1,100.0
Nonpriority Creditor's Name 800 NICOLLET MALL	When was the debt incurred?		
Minneapolis, MN 55402 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐Yes	Other. Specify		

Debtor 2	1 CHRISTO 2 LISETTE	PHER QUEZADA QUEZADA		Case nu	ımber (if kno	own)	
/	Vance & Hu		Last 4 digits of account number	4372			\$1,562.00
	Smithfield,	uptcy Pkwy Ste 100 VA 23430	When was the debt incurred?	Open	ed 08/18		
		City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Check	all that appl	у	
	Debtor 1 on	ly	☐ Contingent				
	Debtor 2 on	ly	☐ Unliquidated				
	Debtor 1 an	d Debtor 2 only	☐ Disputed				
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if thi	is claim is for a community	☐ Student loans				
	debt Is the claim su	bject to offset?	Obligations arising out of a separeport as priority claims	ration ag	reement or o	divorce that you did not	
	■ No		Debts to pension or profit-sharing	ıg plans, a	and other sir	nilar debts	
	Yes		■ Other Specify Collection	Attorne	ey Tempo	e Llc	
0	Verizon Win		Last 4 digits of account number	0001			\$3,196.00
	Attn: Verizo Admini	on Wireless Bankruptcy	When was the debt incurred?	Open 10/31		Last Active	
_	Number Street	ring, MO 63304 City State Zip Code	As of the date you file, the claim	is: Check	all that appl	у	
	_	the debt? Check one.					
	Debtor 1 on		Contingent				
	Debtor 2 on	•	☐ Unliquidated				
	Debtor 1 an	•	☐ Disputed Type of NONPRIORITY unsecure	ب ماماس،			
		of the debtors and another	Student loans	a ciaim:			
	debt	is claim is for a community	☐ Obligations arising out of a sepa	ration ag	reement or o	divorce that you did not	
	No	bject to offset?	report as priority claims Debts to pension or profit-sharir	ıg plans, a	and other sir	nilar debts	
	☐ Yes		Other. Specify				-
Part 3:	List Other	s to Be Notified About a Debt	That You Already Listed				
5. Use thi is tryin have n	is page only if y ng to collect fro nore than one o	you have others to be notified abo	out your bankruptcy, for a debt that yeone else, list the original creditor ir ou listed in Parts 1 or 2, list the addi	Parts 1	or 2, then li	st the collection agency	y here. Similarly, if you
Part 4:	Add the A	mounts for Each Type of Unse	ecured Claim				
	the amounts of f unsecured cla		s. This information is for statistical r	eporting	purposes o	only. 28 U.S.C. §159. Ad	d the amounts for each
				_		Total Claim	
	6a. F otal	Domestic support obligations		6a.	\$	0.00	-
from Pa	aims art 1 6b.	Taxes and certain other debts y	ou owe the government	6b.	\$	63,645.00	
	6c.	Claims for death or personal inj	ury while you were intoxicated	6c.	\$	0.00	_
	6d.	Other. Add all other priority unsec	ured claims. Write that amount here.	6d.	\$	0.00	-
	6e.	Total Priority. Add lines 6a throug	gh 6d.	6e.	\$	63,645.00	
	01	Charles t leave		C4		Total Claim	
	6f.	Student loans		6f.	\$	56,248.00	

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Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 CHRISTOPHER QUEZADA Debtor 2 LISETTE QUEZADA

Case number (if known)

	Tota	al
(claim	ıs
from	Part	2

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

6h.

6i. Other. Add all other nonpriority unsecured claims. Write that amount

Total Nonpriority. Add lines 6f through 6i.

6g.	\$ 0.00
6h.	\$ 0.00
6i.	\$ 85,684.00

141,932.00

Fill in this inform	mation to identify your	case:		
Debtor 1	CHRISTOPHER G	QUEZADA		
	First Name	Middle Name	Last Name	
Debtor 2	LISETTE QUEZA	DA		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF ARIZONA		
Case number _				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

-	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4	,				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5			0.0.0		
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	_

Fill in this info	ormation to identify your	case.		
Debtor 1	CHRISTOPHER OF First Name	Middle Name	Last Name	
Debtor 2	LISETTE QUEZA	DA		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	DISTRICT OF ARIZONA		
Case number				
(if known)				☐ Check if this is an amended filing
				anended ming
	form 106H			
<u>Schedul</u>	le H: Your Cod	ebtors		12/15
our name and	d case number (if known)	boxes on the left. Attach the Answer every question. you are filing a joint case, do r	•	to this page. On the top of any Additional Pages, write as a codebtor.
■ No				
☐ Yes				
□ No. Go ■ Yes. Di	to line 3.	, Nevada, New Mexico, Puerto		iingion, and wisconsin.)
	Yes.			
	In which community stat	e or territory did you live?	-NONE-	. Fill in the name and current address of that person.
	Name of your spouse, former sp Number, Street, City, State & Zip	ouse, or legal equivalent		
in line 2 a	igain as a codebtor only i D), Schedule E/F (Officia	f that person is a guarantor	or cosigner. Make	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 06G). Use Schedule D, Schedule E/F, or Schedule G to fi
	umn 1: Your codebtor e, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				Schedule D, line
Nam	е			Schedule E/F, line
				☐ Schedule G, line
Num City	ber Street	State	ZIP Code	_
22				Cahadula D. lina
3.2 Nam	e			□ Schedule D, line □ Schedule E/F, line
				☐ Schedule C/I , line
Num	ber Street			_
City		State	ZIP Code	

Schedule H: Your Codebtors

						•			
	in this information to identify your optor 1 CHRISTOP	ase: HER QUEZADA							
Del	otor 2 LISETTE QI								
	ouse, if filing) ted States Bankruptcy Court for the	e: DISTRICT OF ARIZO	NA						
Cas (If kr	fficial Form 1061 chedule I: Your Inc as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	OME sible. If two married peo are married and not fili ar spouse is not filing w	pple are filing togetheng jointly, and your sith you, do not includ	spouse i de infori	is liv mati	13 income MM / DD/ \(\) and Debtor 2), bo ing with you, incl on about your spe	ed filing ent show as of th YYYY th are ended info	equally responsible ormation about you more space is need	12/15 for r led,
1.	Till in your employment		Dahtand			Dahtani		- Giin	
	information.		Debtor 1 ■ Employed			■ Empl		n-filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed □ Not employed			■ Empl	•	d	
	employers.	Occupation	HR			RN			
	Include part-time, seasonal, or self-employed work.	Employer's name	PORTS AMERIC	A.		MARIC	OPA II	NTERGATED HEA	LTH
	Occupation may include student or homemaker, if it applies.	Employer's address	CHANDLER, AZ			PHOEN	IIX, AZ		
		How long employed t	here?				MON'	THS	-
Par	Give Details About Mo	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for	any	line, write \$0 in the	space.	Include your non-filin	ıg
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for that perso	on on th	e lines below. If you r	need
						For Debtor 1		Debtor 2 or -filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	6,470.00	\$	4,664.00	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	0.00	

6,470.00

4,664.00

4. Calculate gross Income. Add line 2 + line 3.

Debtor 1 CHRISTOPHER QUEZADA
Debtor 2 LISETTE QUEZADA

Case number (if known)

				For I	Debtor 1		btor 2 or ing spouse	
	Сору	line 4 here	4.	\$	6,470.00	\$	4,664.00	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,618.00	\$	1,166.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	\$	0.00 +	- \$	0.00	
6.	Add t	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,618.00	\$	1,166.00	
7.	Calcu	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,852.00	\$	3,498.00	
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c. 8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8c. 8d. 8e.	\$ \$ \$	0.00 0.00 0.00	\$ \$	0.00 0.00 0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	• \$	0.00	
9.	Add a	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.	Calcu	ulate monthly income. Add line 7 + line 9.	0. \$	4	,852.00 + \$_	3,498	8.00 = \$ 8,350.	00
	Add t	he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Includ other	e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your of friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a lify:	depend				4	00
12.		the amount in the last column of line 10 to the amount in line 11. The resulthat amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ 8,350.	00
13.	Do yo	ou expect an increase or decrease within the year after you file this form? No.	•				monthly incom	е
		Yes. Explain:						\neg
	ш	100. Explain.						

ΕIII	in this informa	ation to identify yo	our case.			l		
				7404		Observat	or all to the	
Deb	tor 1	CHRISTOPH	ER QUE	ZADA			if this is: an amended filing	
	otor 2 ouse, if filing)	LISETTE QU	EZADA			A	supplement show	ving postpetition chapter the following date:
Unit	ed States Bank	ruptcy Court for the	: DISTR	CT OF ARIZONA			MM / DD / YYYY	
	e number nown)							
		orm 106J						
Be	as complete ormation. If m		possible eded, atta	. If two married people ar ach another sheet to this				
Par 1.	t 1: Desc	ribe Your House	hold					
١.	□ No. Go to							
	Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	■ N		st file Offic	ial Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debto	or 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state dependents				CHILD		2	□ No ■ Yes
					CHILD		5	□ No ■ Yes
								□ No
								☐ Yes
								□ No
3.	Do your ex	penses include	_	Lvi				☐ Yes
O.	expenses of	of people other to d your depende	han _	No Yes				
Est exp app	imate your ex enses as of a plicable date.	a date after the	our bankr bankrupto	uptcy filing date unless y ry is filed. If this is a supp	elemental <i>Schedule</i>	orm as a supe J, check the	plement in a Cha box at the top o	pter 13 case to report f the form and fill in the
the		h assistance an		government assistance i cluded it on Schedule I: \			Your expe	enses
4.		or home owners nd any rent for th		nses for your residence. I or lot.	nclude first mortgage	e 4. \$		1,995.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner's	s, or renter	r's insurance		4b. \$		0.00
	4c. Home	e maintenance, re	epair, and	upkeep expenses		4c. \$		0.00
_		eowner's associa				4d. \$		0.00
5.	Additional	mortgage paym	ents for y	our residence , such as ho	me equity loans	5. \$		0.00

CHRISTOPHER QUEZADA Debtor 2 LISETTE QUEZADA Case number (if known) **Utilities:** Electricity, heat, natural gas 6a. \$ 330.00 6a. 6b. \$ 6b. Water, sewer, garbage collection 150.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 187.00 6d. Other. Specify: 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 995.00 Childcare and children's education costs 8. \$ 800.00 Clothing, laundry, and dry cleaning 9. \$ 313.00 10. Personal care products and services 10. \$ 0.00 Medical and dental expenses 11 11. \$ 250.00 12. **Transportation.** Include gas, maintenance, bus or train fare. 203.00 12. \$ Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 100.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$ 8.00 15b. Health insurance 15b. \$ 316.00 15c. Vehicle insurance 15c. \$ 360.00 15d. Other insurance. Specify: 15d. \$ 0.00 16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: INCOME TAX ARREARS 16. \$ 750.00 Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 636.00 17b. Car payments for Vehicle 2 17b. \$ 425.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 Your payments of alimony, maintenance, and support that you did not report as 0.00 deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ Other payments you make to support others who do not live with you. 0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. \$ 20c. Property, homeowner's, or renter's insurance 0.00 20d. \$ 20d. Maintenance, repair, and upkeep expenses 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: ASRS 21. +\$ 532.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 8,350.00 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 22c. Add line 22a and 22b. The result is your monthly expenses. 8,350.00 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 8,350.00 23b. Copy your monthly expenses from line 22c above. 23b. 8,350.00 Subtract your monthly expenses from your monthly income. 0.00 23c. The result is your monthly net income.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

■ No.

Yes. Explain here:

Fill in this infan	mation to identify you			
Fill in this infor	mation to identify you	case:		
Debtor 1	CHRISTOPHER	• •		_
	First Name	Middle Name	Last Name	
Debtor 2	LISETTE QUEZA			_
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF ARIZO	NA	_
Case number				
(if known)				☐ Check if this is an
				amended filing
You must file thi obtaining money	s form whenever you	ile bankruptcy schedule	onsible for supplying correct information es or amended schedules. Making a false nkruptcy case can result in fines up to \$2	e statement, concealing property, or
J	n Below y or agree to pay som	eone who is NOT an atto	orney to help you fill out bankruptcy form	ns?
■ No				
☐ Yes. N	Name of person			n Bankruptcy Petition Preparer's Notice, ration, and Signature (Official Form 119)
that they are	e true and correct. RISTOPHER QUEZA	DA	mmary and schedules filed with this decl	aration and
	TOPHER QUEZADA	L Comment	LISETTE QUEZADA	
Signatu	re of Debtor 1		Signature of Debtor 2	
Date _I	March 27, 2019		Date March 27, 2019	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Fill	in this inforn	nation to identify your	case:			
Del	otor 1	CHRISTOPHER	·			
D-1	-40	First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	nkruptcy Court for the:	DISTRICT OF ARIZONA			
	se number					heck if this is an mended filing
Sta	s complete a	of Financial		re filing together, both are	ankruptcy equally responsible for sup	
	<u> </u>	n). Answer every ques	stion. rital Status and Where You	Lived Before		
1.		current marital statu				
	■ Married□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you li	ved in the last 3 years. Do no	ot include where you live now	٠.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory co, Texas, Washington and W	
	□ No					
		ike sure vou fill out <i>Sch</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Par		n the Sources of You	,			
4.	Fill in the total	al amount of income you	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Ves Fill	in the details.				
	163. FIII	iii tilo dotalla.				
			Debtor 1	0	Debtor 2	0
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$20,000.00	■ Wages, commissions, bonuses, tips	\$15,000.00
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.		s income re deductions and sions)	Sources of inc		Gross income (before deductions and exclusions)
	r last calen inuary 1 to	dar year: December	31, 2018)	■ Wages, commissions, bonuses, tips		\$64,627.50	■ Wages, combonuses, tips	nmissions,	\$64,627.50
				☐ Operating a business			☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips		\$60,750.00	■ Wages, combonuses, tips	nmissions,	\$60,750.00
				☐ Operating a business			☐ Operating a	business	
5.	Include include and other winnings. List each and the second sec	come regard public bene If you are fili	lless of wheth fit payments; ng a joint cas he gross inco	e during this year or the two her that income is taxable. Exa pensions; rental income; inter he and you have income that y home from each source separate	amples of rest; divic you recei	f other income are a dends; money collect ved together, list it	alimony; child supp cted from lawsuits; only once under D	royalties; and ebtor 1.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for I	Bankrup	tcy			
6.	Are eithe ☐ No.	Neither De	ebtor 1 nor D	's debts primarily consumer bebtor 2 has primarily consu personal, family, or househol	umer deb	ots. Consumer deb	<i>t</i> s are defined in 11	U.S.C. § 10 ⁷	1(8) as "incurred by an
		□ No.	90 days befo Go to line 7	re you filed for bankruptcy, di	id you pa	y any creditor a tota	al of \$6,425* or mo	re?	
		☐ Yes	paid that cr not include	each creditor to whom you pai editor. Do not include paymen payments to an attorney for th t on 4/01/19 and every 3 years	nts for do his bankr	mestic support obli- uptcy case.	gations, such as cl	nild support a	ınd alimony. Also, do
	■ Yes.	Debtor 1 c	or Debtor 2 o	r both have primarily consu	ımer deb	ots.		·	
		□ _{No.}	Go to line 7						
		■ Yes	List below e	each creditor to whom you pai ments for domestic support ol this bankruptcy case.					
	Creditor	's Name and	d Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	payment for
	RENT			WITHIN 90 DA	AYS	\$5,985.00	\$0.00	☐ Mortgag ☐ Car ☐ Credit C ☐ Loan Re ☐ Supplie	Card

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Creditor's N	ame and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Family Loa 1616 E Var Phoenix, A	n Buren St	WITHIN 90 DAYS	\$1,275.00	\$9,379.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
Po Box 96	credit Acceptance 5 ord, PA 19317	WITHIN 90 DAYS	\$1,908.00	\$29,330.00	☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
Insiders included for which you a business you alimony.		artners; relatives of any ge n control, or owner of 20%	neral partners; partners or more of their voting	erships of which yog g securities; and a	ou are a general partner; corporati ny managing agent, including one
■ No □ Yes. List	t all payments to an insider.	Dates of payment	Total amount	Amount you	Reason for this payment
. Within 1 year		tcy, did you make any pa	paid yments or transfer a	still owe any property on a	ccount of a debt that benefited
Within 1 year insider? Include payme			•		ccount of a debt that benefited
. Within 1 year insider? Include paymo	r before you filed for bankrup ents on debts guaranteed or co		•		ccount of a debt that benefited Reason for this payment Include creditor's name
Within 1 year insider? Include payme ■ No □ Yes. List Insider's Na	r before you filed for bankrup ents on debts guaranteed or co t all payments to an insider	signed by an insider. Dates of payment	yments or transfer a	any property on a	Reason for this payment
Within 1 year insider? Include payme No Yes. List Insider's Na Part 4: Identify Within 1 year List all such m modifications, No	r before you filed for bankrup ents on debts guaranteed or co t all payments to an insider me and Address	Dates of payment ons, and Foreclosures tcy, were you a party in a	yments or transfer a Total amount paid ny lawsuit, court ac	Amount you still owe	Reason for this payment Include creditor's name
. Within 1 year insider? Include payme No Yes. List Insider's Na Part 4: Identify Within 1 year List all such m modifications,	r before you filed for bankrup ents on debts guaranteed or co t all payments to an insider me and Address y Legal Actions, Repossession r before you filed for bankrup natters, including personal injury , and contract disputes. in the details.	Dates of payment ons, and Foreclosures tcy, were you a party in a	yments or transfer a Total amount paid ny lawsuit, court ac	Amount you still owe	Reason for this payment Include creditor's name
Within 1 year insider? Include payme No Yes. List Insider's Na Part 4: Identify Within 1 year List all such m modifications, No Yes. Fill Case title Case number	r before you filed for bankrup ents on debts guaranteed or co t all payments to an insider me and Address y Legal Actions, Repossession before you filed for bankrup natters, including personal injury , and contract disputes. in the details. er Plaintiff vs LISETTE , LISETTE QUEZADA, et	Dates of payment ons, and Foreclosures tcy, were you a party in a y cases, small claims action	Total amount paid ny lawsuit, court acns, divorces, collection	Amount you still owe	Reason for this payment Include creditor's name rative proceeding? actions, support or custody
Within 1 year insider? Include payme No Yes. List Insider's Na Part 4: Identify Within 1 year List all such m modifications, No Yes. Fill Case title Case number Unknown Included All. CC2018145	r before you filed for bankrup ents on debts guaranteed or co t all payments to an insider me and Address y Legal Actions, Repossession r before you filed for bankrup natters, including personal injury , and contract disputes. in the details. er Plaintiff vs LISETTE , LISETTE QUEZADA, et Plaintiff vs LISETTE , LISETTE QUEZADA, et	Dates of payment ons, and Foreclosures tcy, were you a party in a y cases, small claims action	Total amount paid ny lawsuit, court acns, divorces, collection Court or agency	Amount you still owe	Reason for this payment Include creditor's name rative proceeding? actions, support or custody Status of the case Pending On appeal Concluded

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	Case title Case number	Nature of the case	Court or agency	Status of the	e case
	Unknown Plaintiff vs LISETTE QUEZADA CC2016233142	CIVIL JUDGMENT	MANISTEE JUSTICE COURT	☐ Pending☐ On appe	
				- 7,112.00	
	Unknown Plaintiff vs LISETTE QUEZADA, LISETTE QUEZADA, et al. CC2016208967	CIVIL JUDGMENT	NORTH VALLEY JUSTIC COURT	Pending On appe	
				- 7,065.00	
	HONOR FINANCE V QUEZADA CC2016205605	CIVIL	NORTH VALLEY JC	☐ Pending☐ On apper☐ Conclude	
				JUDGMEN	т
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, foreclosed,	garnished, attached	, seized, or levied?
	Creditor Name and Address	Describe the Property		Date	Value of the
		Explain what happened	d		property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becan a No Yes. Fill in the details.		luding a bank or financial ins	titution, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at		erty in the possession of an a	ssignee for the bene	fit of creditors, a
	☐ Yes				
Par	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup ■ No	tcy, did you give any gifts	s with a total value of more th	an \$600 per person?	•
	☐ Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or cont		s or contributions with a total	l value of more than S	\$600 to any charity?
	Gifts or contributions to charities that total		ı contributed	Dates you	Value
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	,		contributed	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb		CHRISTOPHER QUEZADA LISETTE QUEZADA		c	case number	(if known)			
Part	6:	List Certain Losses							
		n 1 year before you filed for bankru mbling?	ptcy or s	since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster,		
	_	No ⁄es. Fill in the details.							
		cribe the property you lost and the loss occurred	Include	be any insurance coverage for the lot the amount that insurance has paid. Lot ce claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost		
Part	7:	List Certain Payments or Transfers	i						
	cons	ulted about seeking bankruptcy or p	reparin	I you or anyone else acting on your g a bankruptcy petition? , or credit counseling agencies for serv			rty to anyone you		
	_	No Yes. Fill in the details.							
	Pers Addi Ema	on Who Was Paid	OU	Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment		
	James J. Gentile, P.C. 4035 W. Chandler Blvd. #4 Chandler, AZ 85226		\$1325.00 INCLUDES FILING FEE, CREDIT REPORT, CREDIT COUNSELING AND FINANCIAL MANAGEMENT CLASS.		02/22/2019 \$100 03/26/2019 \$325	\$0.00			
	prom	n 1 year before you filed for bankru ised to help you deal with your cred t include any payment or transfer that	litors or	d you or anyone else acting on your to make payments to your creditors and on line 16.	behalf pay o s?	r transfer any prope	rty to anyone who		
	— 1	No							
	□ `	es. Fill in the details.							
	Pers Addı	on Who Was Paid ress		Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment		
i	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No								
	_	es. Fill in the details. on Who Received Transfer		Description and value of	Doscribo	any property or	Date transfer was		
	Addı	ress		property transferred		received or debts	made		
		on's relationship to you							
	benef ■ I	iciary? (These are often called asset- No		did you transfer any property to a se on devices.)	elf-settled tru	ist or similar device	of which you are a		
		Yes. Fill in the details.							
	Nam	e of trust		Description and value of the prope	erty transferr	ed	Date Transfer was made		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of Name of Financial Institution and Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Do you still Who else has or had access Describe the contents to it? have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value Address (Number, Street, City, State and ZIP Code) (Number, Street, City, State and ZIP Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

	otor 1	LISETTE QUEZADA			Cas	e number (if known)	
25.	Have	you notified any governmental unit of	f any release of h	azardous material?			
	_		,				
	_	No Yes. Fill in the details.					
	Nan	ne of site ress (Number, Street, City, State and ZIP Code)	Governme Address (I ZIP Code)	ental unit Number, Street, City, State a		Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or ad	,	aading undar any an	/ironm	nental law? Include settlements	and orders
20.	iiave	you been a party in any judicial of au	illillistrative proc	eeding under any en	,,,,	ientariaw : include settlements	and orders.
	_	No					
		Yes. Fill in the details. e Title	Court or a	gency	Nati	ure of the case	Status of the
		e Number	Name	Number, Street, City,	1440	are of the ease	case
Pai	t 11:	Give Details About Your Business or	Connections to	Any Business			
27.	With	in 4 years before you filed for bankrup	tcy, did you own	a business or have a	ny of	the following connections to a	ny business?
		☐ A sole proprietor or self-employed	in a trade, profes	sion, or other activity	, eithe	er full-time or part-time	
		☐ A member of a limited liability com	pany (LLC) or lim	ited liability partners	hip (Ll	LP)	
		☐ A partner in a partnership					
		☐ An officer, director, or managing ex	ecutive of a corp	ooration			
		☐ An owner of at least 5% of the votir	ng or equity secu	rities of a corporation	1		
		No. None of the above applies. Go to	Part 12.				
	_	Yes. Check all that apply above and fil		elow for each busines	ss.		
		iness Name		ature of the business		Employer Identification numb	er
		Iress ber, Street, City, State and ZIP Code)	Name of accou	intant or bookkeeper		Do not include Social Security Dates business existed	y number or ITIN.
28.		in 2 years before you filed for bankrup tutions, creditors, or other parties.	tcy, did you give	a financial statement	to an	yone about your business? Inc	lude all financial
		No					
		Yes. Fill in the details below.					
		ne lress ber, Street, City, State and ZIP Code)	Date Issued				
Pai	t 12:	Sign Below					
are with	true a a bai	d the answers on this <i>Statement of Fi</i> nd correct. I understand that making a nkruptcy case can result in fines up to §§ 152, 1341, 1519, and 3571.	false statement,	concealing property	, or ob	taining money or property by f	
		ISTOPHER QUEZADA		SETTE QUEZADA			
		OPHER QUEZADA e of Debtor 1		TE QUEZADA ure of Debtor 2			
Dat	e M	larch 27, 2019	Date	March 27, 2019			
Did	vou a	ttach additional pages to Your Statem	– ent of Financial A	Affairs for Individuals	Filing	for Bankruptcy (Official Form	107)?
	•	and other	C. I manoidi F		y	zamapioj (omoidi i omi	,-
	'es						
Did ■ N		ay or agree to pay someone who is no	t an attorney to h	nelp you fill out bankı	uptcy	forms?	
	es. N	ame of Person Attach the Bankro		parer's Notice, Declara			nac- *
OHIC	ial Forr	ii io/ Staten	nem or Financial Af	ians for mulviduals FIIII	ig ior E	σαιτκι αρτο γ	page 7

Debtor 1	CHRISTOPHER C	UEZADA		
	First Name	Middle Name	Last Name	
Debtor 2	LISETTE QUEZAI	DA .		
Spouse if, filing)	First Name	Middle Name	Last Name	
Inited States Ba	ankruptcy Court for the:	DISTRICT OF ARIZONA	A	
f known)				☐ Check if this is at amended filing

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's Family Loan Co Inc	☐ Surrender the property.	■ No
Description of 2004 CHEVY SILVERADO	 Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. 	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's Flagship Credit Acceptance name:	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
Description of 2018 DODGE JOURNEY	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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	otor 1 CHRISTOPHER QUEZADA LISETTE QUEZADA	Case number (if known)
Des	ssor's name: scription of leased perty:	□ No
Les Des	ssor's name: scription of leased perty:	□ No
Les Des	ssor's name: scription of leased	☐ Yes
Les	sor's name: scription of leased	☐ Yes
Les	sor's name: scription of leased	☐ Yes
Les	perty: ssor's name: scription of leased	☐ Yes
Pro Les	perty: ssor's name:	☐ Yes
Pro	perty: t 3: Sign Below	☐ Yes
	ler penalty of perjury, I declare that I have indicated my intentic perty that is subject to an unexpired lease.	on about any property of my estate that secures a debt and any personal
X	/s/ CHRISTOPHER QUEZADA	X /s/ LISETTE QUEZADA
	CHRISTOPHER QUEZADA Signature of Debtor 1	LISETTE QUEZADA Signature of Debtor 2
	Date March 27, 2019	Date March 27, 2019

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Debtor 1 CHRISTOPHER QUEZADA Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: District of Arizona Case number (if known) Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly Income Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name are as enumber (if known) if you believe that you are exempted from a presumption of abuse under \$707(b)(2) (Official Form 122A-1Supp) with this form. Calculate Your Current Monthly Income 12/ Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name are senumber (if known). If you believe that you are exempted from a presumption of abuse under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
Debtor 2 LISETTE QUEZADA United States Bankruptcy Court for the: District of Arizona Distr
Case number (if known) Case number Cas
applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2). 3. The Means Test does not apply now because of qualified military service but it could apply later. Check if this is an amended filing Chapter 7 Statement of Your Current Monthly Income
Check if this is an amended filing
Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly Income 12/ Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name are case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filling with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
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■ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. □ Married and your spouse is NOT filing with you. You and your spouse are: □ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
☐ Married and your spouse is NOT filing with you. You and your spouse are: ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare unde penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).
Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.
Column A Column B Debtor 1 Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all
payroll deductions). \$6,469.56 \$4,664.48
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. \$
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.
5. Net income from operating a business, profession, or farm
Debtor 1
Gross receipts (before all deductions) \$ 0.00
Ordinary and necessary operating expenses -\$ 0.00
Ordinary and necessary operating expenses -\$ 0.00 Net monthly income from a business, profession, or farm \$ 0.00 Copy here -> \$ 0.00 \$ 0.00
Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm \$ 0.00 Copy here -> \$ 0.00 \$ 0.00 Net income from rental and other real property
Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm \$ 0.00 Copy here -> \$ 0.00 \$ 0.00 \$ 0.00 Copy here ->
Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm \$ 0.00 Copy here -> \$ 0.00 \$ 0.00 Net income from rental and other real property

Official Form 122A-1

0.00

Desc

0.00

7. Interest, dividends, and royalties

Case number (if known)

				Column A Debtor 1		Column B Debtor 2 o non-filing	
8.	Unemployment compensation			\$	0.00	\$	0.00
	Do not enter the amount if you contend that the amoun the Social Security Act. Instead, list it here:	t received was a ber	nefit under				
	For you\$		0.00				
	For your spouse \$		0.00				
9.	Pension or retirement income. Do not include any an benefit under the Social Security Act.	nount received that v	vas a	\$	0.00	\$	0.00
10.	Income from all other sources not listed above. Specific points and benefits received under the Social Species as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paym manity, or internatior a separate page and	ents nal or	\$ s	0.00	\$	0.00
	Total amounts from separate pages, if any.			\$	0.00	\$	0.00
	Total amounts nom separate pages, il any.		+	Ψ	0.00	Ψ	0.00
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	6,469.56	+	4,664.48	= \$11,134.04
							Total current monthly income
Part	2: Determine Whether the Means Test Applies t	o You					
12.	Calculate your current monthly income for the year	•					
	12a. Copy your total current monthly income from line	11		Сор	y line 11	here=>	\$ <u>11,134.04</u>
	Multiply by 12 (the number of months in a year)						x 12
	12b. The result is your annual income for this part of th	e form				12b	. \$133,608.48_
13.	Calculate the median family income that applies to	you. Follow these st	eps:				
	Fill in the state in which you live.	AZ]				
	i iii iii die state iii wiiisii you iive.	7.2	_				
	Fill in the number of people in your household.	4					
	Fill in the median family income for your state and size						\$79,026.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank			in the separa	ate instruc	ctions	
14.	How do the lines compare?						
	14a. Line 12b is less than or equal to line 13. OGo to Part 3.	n the top of page 1,	check box	1, There is	no presun	nption of abus	e.
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box	2, The pre	esumption o	f abuse is	determined by	y Form 122A-2.
Part	3: Sign Below						
	By signing here, I declare under penalty of perjury	that the information	on this sta	tement and	in any att	achments is tr	ue and correct.
	X /s/ CHRISTOPHER QUEZADA	v		TTE QUEZ	7404		
	CHRISTOPHER QUEZADA	^		E QUEZAI			
	Signature of Debtor 1			of Debtor 2			
	Date March 27, 2019	Date	March 2				
	MM / DD / YYYY		MM / DD	/ YYYY	·		
	If you checked line 14a, do NOT fill out or file Forn	n 122A-2.					
	If you checked line 14b, fill out Form 122A-2 and f	ile it with this form.					

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

Fill in this information to identify your case:							
Debtor 1 CHRISTOPHER QUEZADA							
Debtor 2 LISETTE QUEZADA							
(Spouse, if filing)						
United States Ba	ankruptcy Court for the:	District of Arizona					
Case number(if known)							

Check the appropriate box as directed in lines 40 or 42:	
According to the calculations required by this Statement:	
■ 1. There is no presumption of abuse.	
☐ 2. There is a presumption of abuse.	

☐ Check if this is an amended filing

Official Form 122A - 2

Chapter 7 Means Test Calculation

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Par	1: Determine Your Adjusted Income						
1.	Copy your total current monthly income. Copy	ine 11 from Official Fo	orm 122	A-1 here=>	\$_	11,134.)4_
2.	Did you fill out Column B in Part 1 of Form 122A-1? ☐ No. Fill in \$0 for the total on line 3.						
	■ Yes. Is your spouse Filing with you?						
	☐ No. Go to line 3.						
	Yes. Fill in \$0 for the total on line 3.						
3.	Adjust your current monthly income by subtracting any part of household expenses of you or your dependents. Follow these st		not use	ed to pay for the			
	On line 11, Column B of Form 122A–1, was any amount of the incorexpenses of you or your dependents?	ne you reported for you	r spouse	NOT regularly us	ed for	the household	
	■ No. Fill in 0 for the total on line 3.						
	☐ Yes. Fill in the information below:						
	State each purpose for which the income was used For example, the income is used to pay your spouse's tax det support other than you or your dependents.	Fill in the are subtr your spo	acting fi	om			
		\$					
		\$					
		\$					
	Total.	\$	0.00				
				Copy total here	=>	- \$0.0	00
4.	Adjust your current monthly income. Subtract line 3 from line 1.					\$11,134.04	_

Official Form 122A-2

Chapter 7 Means Test Calculation

Part 2:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

4

National Standards

You must use the IRS National Standards to answer the guestions in lines 6-7.

Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1,694.00

Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person 52.00
- 7b. Number of people who are under 65
- 208.00 7c. Subtotal. Multiply line 7a by line 7b. Copy here=> \$ 208.00

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person 114.00
- 7e. Number of people who are 65 or older 0
- 7f. **Subtotal.** Multiply line 7d by line 7e. 0.00 0.00 Copy here=>
- 7g. Total. Add line 7c and line 7f 208.00 Copy total here=> 208.00

Debtor 1

Debtor 2

Case number (if known)

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

		n information from the ccy purposes into two p	IRS, the U.S. Trustee Programoarts:	m has divided	the IRS L	ocal Stand	ard for housi	ng for		
■ H	lousi	ng and utilities - Insura	ance and operating expenses	S						
= H	lousi	ng and utilities - Mortg	age or rent expenses							
To a	answ	er the questions in line	s 8-9, use the U.S. Trustee P	rogram chart.						
			the link specified in the separate the bankruptcy clerk's office.	te instructions	for this forr	n.				
8.			rance and operating expenser your county for insurance and					5, fill \$		671.00
9.	Hou	sing and utilities - Mor	tgage or rent expenses:							
	9a.		ople you entered in line 5, fill ir r mortgage or rent expenses				\$ 1,	063.00		
	9b.	Total average monthly	payment for all mortgages and	other debts se	cured by y	our home.				
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.									
		Name of the creditor		Average m payment	onthly					
		-NONE-		\$						
		Tot	al average monthly payment	\$	0.00	Copy here=>	-\$	0.00	Repeat this amount on line 33a.	
	9c.	Net mortgage or rent ex	pense.							
			verage monthly payment) from amount is less than \$0, enter \$			\$	1,063.00	Copy here=>	\$	1,063.00
10.			rustee Program's division of our monthly expenses, fill in				g is incorrect	and	\$	0.00
	Ex	olain why:								
11.	Loc	al transportation exper	nses: Check the number of veh	nicles for which	you claim	an ownersh	nip or operating	j expense		
		. Go to line 14.								
	□ 1	. Go to line 12.								
	2 2	or more. Go to line 12.								
12.			: Using the IRS Local Standard						\$	440.00

Official Form 122A-2

13.	You r		pense: Using the IRS Local if you do not make any loan							
Ve	hicle 1	Describe Vehicle 1:	2004 CHEVY SILVERAI	00						
13a.	Owne	ership or leasing costs usin	g IRS Local Standard			\$_	49	97.00		
13b.		age monthly payment for allot include costs for leased v	I debts secured by Vehicle 1. vehicles.							
	are co		y payment here and on line ocured creditor in the 60 mont			t				
	ı	Name of each creditor for	Vehicle 1	Average i	monthly					
		Family Loan Co Inc		\$	425.00					
		Total A	Average Monthly Payment	\$	425.00	Copy here =>	-\$	425	Repeat this amount on line 33b.	
13c.		/ehicle 1 ownership or leas act line 13b from line 13a.	e expense if this amount is less than \$0	, enter \$0.		\$	7	72.00	Copy net Vehicle 1 expense here => \$	72.00
Ve	hicle 2	Describe Vehicle 2:	2018 DODGE JOURNE	Y						
13d.	Owne	ership or leasing costs usin	g IRS Local Standard			. \$	49	97.00		
13e.		age monthly payment for all develoces.	I debts secured by Vehicle 2.	Do not incl	ude costs for					
	I	Name of each creditor for	Vehicle 2	Average i	monthly					
		Flagship Credit Accep	tance	\$	636.00					
		Total A	Average Monthly Payment	\$	636.00	Copy here => -\$		636.0	Repeat this amount on line 33c.	
13f.		ehicle 2 ownership or lease act line 13e from line 13d.	e expense if this amount is less than \$0	, enter \$0		\$		0.00	Copy net Vehicle 2 expense here => \$	0.00
14.			: If you claimed 0 vehicles in ce regardless of whether you				dards, f	ill in the	Public \$	0.00
15.	also d	deduct a public transportati	on expense: If you claimed a on expense, you may fill in we hall standard for <i>Public Trans</i> ,	hat you beli						0.00

Official Form 122A-2

Oth	er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sales, or use taxes.	\$_	2,783.00
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	532.00
18.	Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$_	8.00
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or		
	for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.	\$	800.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.	· <u>-</u>	
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$	0.00
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.		
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$_	187.00
24.	Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.	\$	8,458.00

Add	itional Expense Deductions These are additional of	deductions allowed by the	e Means Test.							
	Note: Do not include any expense allowances listed in lines 6-24.									
25.	Health insurance, disability insurance, and health sinsurance, disability insurance, and health savings acceptor dependents.									
	Health insurance	\$316.00								
	Disability insurance	\$0.00								
	Health savings account									
	Total	\$316.00	Copy total here=>	\$	316.00					
	Do you actually spend this total amount?									
	No. How much do you actually spend?									
	Yes	\$								
26.	Continued contributions to the care of household of continue to pay for the reasonable and necessary care your household or member of your immediate family will include contributions to an account of a qualified ABLE	and support of an elderly ho is unable to pay for su	c, chronically ill, or disabled member of ch expenses. These expenses may	\$	0.00					
27.	 Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. 									
	By law, the court must keep the nature of these expenses confidential.									
28.	 Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8. 									
	If you believe that you have home energy costs that are 8, then fill in the excess amount of home energy costs.	e more than the home en	ergy costs included in expenses on line							
	You must give your case trustee documentation of you amount claimed is reasonable and necessary.	r actual expenses, and yo	ou must show that the additional	\$	0.00					
29.	Education expenses for dependent children who at \$160.42* per child) that you pay for your dependent ch public elementary or secondary school.									
	You must give your case trustee documentation of you claimed is reasonable and necessary and not already a		. ,							
	* Subject to adjustment on 4/01/19, and every 3 years	after that for cases begun	on or after the date of adjustment.	\$	320.84					
30.	Additional food and clothing expense. The monthly higher than the combined food and clothing allowances than 5% of the food and clothing allowances in the IRS	s in the IRS National Stan								
	To find a chart showing the maximum additional allowal instructions for this form. This chart may also be availa									
	You must show that the additional amount claimed is re	easonable and necessary	<i>'</i> .	\$	0.00					
31.	Continuing charitable contributions. The amount that instruments to a religious or charitable organization. 26		tribute in the form of cash or financial	+\$	0.00					
32.	Add all of the additional expense deductions. Add lines 25 through 31.			\$	636.84					

Debtor 1

Debtor 2

|--|

Dedu											
	ctions for Debt Payment										
lo To	or debts that are secured by an integrans, and other secured debt, fill in the calculate the total average monthly reditor in the 60 months after you file f	lines 3 payme	33a through 33 int, add all amo	Be. unts that are	-						
0.	Mortgages on your home:									verage m	onthly
33a.	Copy line 9b here							=>	\$		0.00
	Loans on your first two vehicles:								-		
33b.	Copy line 13b here							=>	\$		425.00
33c.	Copy line 13e here								\$		636.00
33d.	List other secured debts:										
Name	of each creditor for other secured debt		Identify proper	rty that secure	s the debt		Does pay include t insurance	axes or			
							N	0			
	-NONE-								\$		
-							- "	55	Φ.		
							□ N	0			
							□ Y	es	\$		
							□ Y	es	+\$		
33e.	Total average monthly payment. Add	d lines (33a through 33	d		\$	1,061.	00 1	Copy total here=>	\$	1,061.00
34. Ai	re any debts that you listed in line or r other property necessary for your	33 seci	ured by your p	orimary resid	ence, a vehicl		1,061.	00 1	total	\$	1,061.00
34. Ai	re any debts that you listed in line or r other property necessary for your	33 security support	ured by your port or the supp y to a creditor, i	orimary reside ort of your of addition to ty (called the	lence, a vehicl lependents? the payments		1,061.	00 1	total	\$	1,061.00
34. Ai	re any debts that you listed in line are other property necessary for your No. Go to line 35. Yes. State any amount that you make the listed in line 33, to keep poss	33 security supports ust pay ession he info	ured by your port or the supp y to a creditor, i	orimary residence of your of addition to the type (called the	lence, a vehiclependents? the payments cure amount).		1,061. Total cure amount	00 1	total	\$	ly cure
34. An or	re any debts that you listed in line are other property necessary for your. No. Go to line 35. Yes. State any amount that you m listed in line 33, to keep poss Next, divide by 60 and fill in the	33 security supports ust pay ession he info	ured by your port or the supp y to a creditor, in of your proper trimation below.	orimary residence of your of addition to the type (called the	lence, a vehiclependents? the payments cure amount).		Total cure	<u>oo</u> ¦	total	Month	ly cure
34. An or	re any debts that you listed in line: r other property necessary for your No. Go to line 35. Yes. State any amount that you m listed in line 33, to keep poss Next, divide by 60 and fill in the	33 security supports ust pay ession he info	ured by your port or the supp y to a creditor, in of your proper trimation below.	orimary residence of your of addition to the type (called the	lence, a vehiclependents? the payments cure amount).	е,	Total cure	<u>oo</u> ¦	total here=>	Month	ly cure
34. An or	re any debts that you listed in line: r other property necessary for your No. Go to line 35. Yes. State any amount that you m listed in line 33, to keep poss Next, divide by 60 and fill in the	33 security supports ust pay ession he info	ured by your port or the supp y to a creditor, in of your proper trimation below.	orimary residence of your of addition to the type (called the	lence, a vehiclependents? the payments cure amount).	e, \$	Total cure amount	• 6	total here=>	Monthlamoun	ly cure
34. Ai or Name -NO	re any debts that you listed in line: r other property necessary for your No. Go to line 35. Yes. State any amount that you m listed in line 33, to keep poss Next, divide by 60 and fill in the	ust payession he info	ured by your port or the supply to a creditor, it of your proper promation below. entify property the priority tax, chi	orimary residence of your of addition to ty (called the mat secures the	lence, a vehiclependents? the payments cure amount). e debt Total	e ,	Total cure amount	• 6	total here=>	Monthlamoun	ly cure t
34. Al or Name -NO 35. Do an	re any debts that you listed in line: r other property necessary for your No. Go to line 35. Yes. State any amount that you m listed in line 33, to keep poss Next, divide by 60 and fill in the of the creditor ONE-	ust payession he info	ured by your port or the supply to a creditor, it of your proper promation below. entify property the priority tax, chi	orimary residence of your of addition to ty (called the mat secures the	lence, a vehiclependents? the payments cure amount). e debt Total	e ,	Total cure amount	• 6	total here=>	Monthlamoun	ly cure t
34. Al or Name -NO 35. Do an	re any debts that you listed in line ar other property necessary for your No. Go to line 35. Yes. State any amount that you make the listed in line 33, to keep posson Next, divide by 60 and fill in the of the creditor ONE- o you owe any priority claims such re past due as of the filling date of your line 36.	ust payession he info Ide as a prour ba	ured by your port or the supply to a creditor, it of your proper ormation below. entify property the priority tax, chankruptcy case	orimary residence of your of addition to ty (called the nat secures the art of the secures the secure the secures the secure the secures the secure the secur	lence, a vehiclependents? the payments cure amount). e debt Total or alimony - th	e ,	Total cure amount	• 6	total here=>	Monthlamoun	ly cure t

Official Form 122A-2

For r	more	eligible to file a case under Chapter 13? 11 U.S.C. § 10 information, go online using the link for <i>Bankruptcy Basi</i> ons for this form. <i>Bankruptcy Basics</i> may also be available	cs specified							
	No.	Go to line 37.								
■ Y	Yes.	Fill in the following information.								
		Projected monthly plan payment if you were filing under	Chapter 13	9	\$_	1,70	00.00			
	Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).					7.40)			
To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.								Copy t	total	
		Average monthly administrative expense if you were filing	ng under Ch	apter 13		\$ 125	.80	here=:	> \$	125.80
		of the deductions for debt payment. s 33e through 36.							\$	2,010.55
Total De	educt	ions from Income								
38. Add	all o	f the allowed deductions.								
		e 24, All of the expenses allowed under IRS e allowances	\$	8,458.00						
		e 32, All of the additional expense deductions	\$	636.84	_					
		e 37, All of the deductions for debt payment	+\$	2,010.55	_					
					_]				
		Total deductions	\$	11,105.39	-	Copy total	here	=>	\$	11,105.39
Part 3:	Dete	ermine Whether There is a Presumption of Abuse								
39. Calc	ulate	e monthly disposable income for 60 months								
39a	a. Cop	by line 4, adjusted current monthly income	\$	11,134.04	_					
39b	o. Cop	by line 38, Total deductions	-\$	11,105.39	_					
390		nthly disposable income. 11 U.S.C. § 707(b)(2). otract line 39b from line 39a	\$	28.65		Copy here=>\$			28.65	
For	the r	next 60 months (5 years)					x 60			
							Сору			
390	d. Tot	al. Multiply line 39c by 60	39d.	\$	1	,719.00	here=	>	\$	1,719.00
40. Find	lout	whether there is a presumption of abuse. Check the b	ox that app	lies:			J	L		
■ 1	Γhe li	ne 39d is less than \$7,700*. On the top of page 1 of this	s form, chec	k box 1, The	ere	is no presui	mption	of abu	se. Go to	Part 5.
		ne 39d is more than \$12,850*. On the top of page 1 of the if you claim special circumstances. Go to Part 5.	his form, ch	eck box 2, T	he	re is a presi	umption	of ab	use. You	may fill out
□ 1	Γhe li	ne 39d is at least \$7,700*, but not more than \$12,850°	. Go to line	41.						
*Sub	oject t	o adjustment on 4/01/19, and every 3 years after that for	cases filed	on or after th	ne (date of adju	stment.			

Official Form 122A-2

41. 41a. Fill in the amount of your total nonpriority unsecured debt. If you filled out A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	
X	.25
41b. 25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(l) \$	Copy here=> \$
Multiply line 41a by 0.25	
42. Determine whether the income you have left over after subtracting all allowed deductions is et 25% of your unsecured, nonpriority debt. Check the box that applies:	nough to pay
☐ Line 39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>There is no presu</i> Go to Part 5.	ımption of abuse.
☐ Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2, <i>Thei presumption of abuse</i> . You may fill out Part 4 if you claim special circumstances. Then go to Part	
art 4: Give Details About Special Circumstances	
 Do you have any special circumstances that justify additional expenses or adjustments of currer reasonable alternative? 11 U.S.C. § 707(b)(2)(B). 	nt monthly income for which there is n
■ No. Go to Part 5.	
☐ Yes. Fill in the following information. All figures should reflect your average monthly expense or inco item. You may include expenses you listed in line 25.	ome adjustment for each
You must give a detailed explanation of the special circumstances that make the expenses or i necessary and reasonable. You must also give your case trustee documentation of your actual adjustments.	
Give a detailed explanation of the special circumstances Average mon or income ad	
or income ad	
or income ad	
s \$	
\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	ljustment
s s sign Below	ny attachments is true and correct.
s s s s s s s s s s x X /s/ CHRISTOPHER QUEZADA CHRISTOPHER QUEZADA CHRISTOPHER QUEZADA CHRISTOPHER QUEZADA CHRISTOPHER QUEZADA LISETTE QUEZADA LISETTE QUEZADA LISETTE QUEZADA	ny attachments is true and correct.
s s s s s s s s s s x x s Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in arx X /s/ CHRISTOPHER QUEZADA X /s/ LISETTE QUEZADA	ny attachments is true and correct.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Ch	apter 7:	Liquidation	
	\$245	filing fee	-
	\$75	administrative fee	
+	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
<u> </u>	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy CourtDistrict of Arizona

Debtor(s) Sayo(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) a compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for ser be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received Sayo0.0 Balance Due Debtor Other (specify): HYATT The source of the compensation be paid to me was: Debtor Other (specify): HYATT Have not agreed to share the above-disclosed compensation with any other person unless they are members and associates copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation reaffirmation agreements and applications as a needed; preparation and filing of motions pursua 522(f)(2)(A) for avoidance of liens on household goods. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief fro any other adversary pr		CHRISTOPHER QUEZADA	2 18 12 20 02 1 22 22 0 22 0		
DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S) 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) a compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for ser be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 900.00 Prior to the filing of this statement I have received \$ 900.00 Balance Due \$ 0.00 2. The source of the compensation paid to me was: Debtor Other (specify): HYATT 3. The source of compensation to be paid to me is: Debtor Other (specify): HYATT 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation reaffirmation agreements and applications as needed; preparation and filing of motions pursua 522(f)(2)(A) for avoidance of liens on household goods. 6. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief fro any other adversary proceeding.	-				
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			CERTIFICATION		
uns bankrupus proceeding.		ertify that the foregoing is a complete statem kruptcy proceeding.	nent of any agreement or arrangement for payment	ent to me for r	epresentation of the debtor(s) in
March 27, 2019 /s/ JAMES J. GENTILE					
Date JAMES J. GENTILE #9983 Signature of Attorney JAMES G. GENTILE, PC 4035 W CHANDLER BLVD SUITE #4 Chandler, AZ 85226 (480)961-1906 Fax: (480)705-4425 JJG@AZLAWYER.NET Name of law firm	Date		Signature of Attorney JAMES G. GENTILE, P 4035 W CHANDLER BL SUITE #4 Chandler, AZ 85226 (480)961-1906 Fax: (480)144	C .VD 30)705-4425	

United States Bankruptcy Court District of Arizona

re LISETTE QUEZADA		Case No.
	Debtor(s)	Chapter 7
	.,	
		☐ Check if this is an
		Amended/Supplemental Mailing List
		(Include only newly added or changed creditors.)
		changed creditors.)
	MAILING LIST DECLAR	ATION
	MAILING LIGI BEGLAN	ATION
We, CHRISTOPHER QUEZAD	A and LISETTE QUEZADA, do hereby ce	ertify, under penalty of perjury, that the Maste
lling List consisting of 6 naga(s)	, is complete, correct and consistent with t	ha dahtar(s)! Sahadulas
mig List, consisting of page(s)	, is complete, correct and consistent with t	ne debioi(s) senedules.
ate: March 27, 2019	/s/ CHRISTOPHER QUEZA	
te: March 27, 2019	/s/ CHRISTOPHER QUEZA CHRISTOPHER QUEZADA	
te: March 27, 2019		
	CHRISTOPHER QUEZADA	
	CHRISTOPHER QUEZADA Signature of Debtor	
	CHRISTOPHER QUEZADA Signature of Debtor /s/ LISETTE QUEZADA	
te: March 27, 2019	CHRISTOPHER QUEZADA Signature of Debtor /s/ LISETTE QUEZADA LISETTE QUEZADA	
March 27, 2019	CHRISTOPHER QUEZADA Signature of Debtor /s/ LISETTE QUEZADA LISETTE QUEZADA Signature of Debtor /s/ JAMES J. GENTILE Signature of Attorney	
ate: March 27, 2019	CHRISTOPHER QUEZADA Signature of Debtor /s/ LISETTE QUEZADA LISETTE QUEZADA Signature of Debtor /s/ JAMES J. GENTILE Signature of Attorney JAMES J. GENTILE #9983	
March 27, 2019	CHRISTOPHER QUEZADA Signature of Debtor /s/ LISETTE QUEZADA LISETTE QUEZADA Signature of Debtor /s/ JAMES J. GENTILE Signature of Attorney JAMES J. GENTILE #9983 JAMES G. GENTILE, PC	
March 27, 2019	CHRISTOPHER QUEZADA Signature of Debtor /s/ LISETTE QUEZADA LISETTE QUEZADA Signature of Debtor /s/ JAMES J. GENTILE Signature of Attorney JAMES J. GENTILE #9983	

MML_Requirements_8-2018 MML-3

(480)961-1906 Fax: (480)705-4425

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AD ASTRA RECOVERY
7330 WEST 33RD STREET NORTH
SUITE 118
WICHITA KS 67205

ARIZONA FEDERAL ATTN: RISK MANAGEMENT PO BOX 60070 PHOENIX AZ 85082

AUTO NOW FINANCIAL SER ATTN: BANKRUPTCY PO BOX 816 GLENDALE AZ 85311

AZ DEPT OF REVENUE 1600 W MONROE PHOENIX AZ 85007-2650

CAINE & WEINER
ATTN: BANKRUPTCY
PO BOX 5010
WOODLAND HILLS CA 91365

CAMELBACK FINANCE INC/CACTUA JACKS ATTN: BANKRUPTCY 2440 W CAMELBACK RD PHOENIX AZ 85015

CAMELBACK FINANCE INC/CACTUA JACKS ATTN: BANKRUPTCY 2440 W CAMELBACK RD PHOENIX AZ 85015

CHEX SYSTEMS
ATTN: CUSTOMER RELATIONS
7805 HUDSON RD #100
SAINT PAUL MN 55125

CONN'S HOMEPLUS ATTN: BANKRUPTCY DEPT PO BOX 2358 BEAUMONT TX 77704

CONN'S HOMEPLUS ATTN: BANKRUPTCY DEPT PO BOX 2358 BEAUMONT TX 77704

CONN'S HOMEPLUS ATTN: BANKRUPTCY DEPT PO BOX 2358 BEAUMONT TX 77704

CONVERGENT OUTSOURCING, INC. ATTN: BANKRUPTCY PO BOX 9004 RENTON WA 98057

CSC CREDIT SERVICES BOX 740040 ATLANTA GA 30374

DIVERSIFIED ADJUSTMENT SWERVICES, INC DASI-BANKRUPCTY PO BOX 32145 FRIDLEY MN 55432

DIVERSIFIED CONSULTANTS, INC. ATTN: BANKRUPTCY PO BOX 551268 JACKSONVILLE FL 32255

EQUIFAX INFORMATION SERIVICES, LLC PO BOX 740256 ATLANTA GA 30374

ERC/ENHANCED RECOVERY CORP ATTN: BANKRUPTCY 8014 BAYBERRY ROAD JACKSONVILLE FL 32256

EXPERIAN
PO BOX 9701
ALLEN TX 75013

FAMILY LOAN CO INC 1616 E VAN BUREN ST PHOENIX AZ 85006

FLAGSHIP CREDIT ACCEPTANCE PO BOX 965 CHADDS FORD PA 19317

HONOR FINANCE 909 DAVIS STREET SUITE 260 EVANSTON IL 60201

INDRANIL PAL 6812 W SKYLARK DR GLENDALE AZ 85308

IRS
CENTRALIZED INSOLVENCY OPERATIONS
PO BOX 7346
PHILADELPHIA PA 19101-7346

NAVY FCU ATTN: BANKRUPTCY PO BOX 3000 MERRIFIELD VA 22119

PROGRESSIVE 256 W DATA DR DRAPER UT 84020

PROGRESSIVE MANAGEMENT SYSTEMS ATTN: BANKRUPTCY DEPARTMENT 1521 W CAMERON AVE., FIRST FLOOR WEST COVINA CA 91790

PROGRESSIVE MANAGEMENT SYSTEMS ATTN: BANKRUPTCY DEPARTMENT 1521 W CAMERON AVE., FIRST FLOOR WEST COVINA CA 91790

PURCHASING POWER 1349 W PEACHTREE ST #1100 ATLANTA GA 30309 REGIONAL ACCEPTANCE CO ATTN: BANKRUPTCY PO BOX 1487 WILSON NC 27894

RENTER'S WAREHOUSE 7227 N 16TH ST SUITE 260 PHOENIX AZ 85020

ROCKY'S AUTO CREDIT PO BOX 6834 MESA AZ 85216

SNAP FINANCE PO BOX 26561 SALT LAKE CITY UT 84126

TRANS UNION
PO BOX 1000
CRUM LYNNE PA 19022

U.S. DEPARTMENT OF EDUCATION ECMC/BANKRUPTCY PO BOX 16408 SAINT PAUL MN 55116

U.S. DEPARTMENT OF EDUCATION ECMC/BANKRUPTCY PO BOX 16408 SAINT PAUL MN 55116

U.S. DEPARTMENT OF EDUCATION ECMC/BANKRUPTCY PO BOX 16408 SAINT PAUL MN 55116

U.S. DEPARTMENT OF EDUCATION ECMC/BANKRUPTCY PO BOX 16408 SAINT PAUL MN 55116

U.S. DEPARTMENT OF EDUCATION ECMC/BANKRUPTCY PO BOX 16408 SAINT PAUL MN 55116

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U.S. DEPARTMENT OF EDUCATION ECMC/BANKRUPTCY
PO BOX 16408
SAINT PAUL MN 55116

US BANK 800 NICOLLET MALL MINNEAPOLIS MN 55402

VANCE & HUFFMAN LLC ATTN: BANKRUPTCY 55 MONETTE PKWY STE 100 SMITHFIELD VA 23430

VERIZON WIRELESS ATTN: VERIZON WIRELESS BANKRUPTCY ADMINI 500 TECHNOLOGY DR, STE 550 WELDON SPRING MO 63304